

USDC SDNY DOCUMENT ELECTRONICALLY FILED DOC #: DATE FILED: 2/3/2021

**UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK**

-----X
UNITED STATES OF AMERICA, :
: :
: :
-against- :
: :
LEONARDO PIÑA, :
: :
Defendant. :
-----X

**01 CR 619 (VM)
DECISION AND ORDER**

VICTOR MARRERO, U.S.D.J.:

By letter dated September 3, 2020, defendant Leonardo Piña ("Piña") requested that the Court assign him an attorney to pursue a motion for compassionate release because, among other things, the mother of his daughter had recently died from COVID-19. (See Dkt. No. 390.) The Court construed the letter as a motion for compassionate release under 18 U.S.C. § 3582(c)(1)(A) and denied the motion without prejudice because Piña had not demonstrated compliance with Section 3582's exhaustion requirements, nor had he sufficiently established extraordinary and compelling circumstances warranting relief. (See Dkt. No. 393.)

Now before the Court is Piña's renewed request for an attorney to assist him in filing a compassionate release motion. (See attached letter.) For the reasons stated herein the request is DENIED.

In criminal matters, the right to appointed counsel "extends to the first appeal of right, and no further."

Starkes v. United States, No. 20 Civ. 0265, 2020 WL 230944, at *1 (S.D.N.Y. Jan. 15, 2020) (quoting Pennsylvania v. Finley, 481 U.S. 551, 555 (1987)). For a compassionate release motion such as the one Piña contemplates, it is within the district court's discretion whether to appoint counsel. See United States v. Hilliard, No. 17 CR 35, 2021 WL 242538, at *2 n.1 (S.D.N.Y. Jan. 25, 2021).

The Court finds that appointment of counsel is unwarranted here because Piña's chances of success on his proposed motion for compassionate release are "extremely slim." Hodge v. Police Officers, 802 F.2d 58, 60 (2d Cir. 1986); see also United States v. Myers, 524 F. App'x 758, 759 (2d Cir. 2013) ("In this case, where it was readily ascertainable from the record that Appellant was ineligible for a reduction in sentence, the court did not abuse its discretion by denying his motion for appointment of counsel." (quoting United States v. Cirineo, 372 F. App'x 178, 179-80 (2d Cir. 2010))).

As a threshold matter, Piña has now satisfied the exhaustion requirements of Section 3582(c)(1). See 18 U.S.C. § 3582(c)(1) (noting that the court may entertain a defendant's compassionate release motion after the defendant "has fully exhausted all administrative rights").

Nonetheless, Piña has failed to establish that the circumstances of his case entitle him to the relief he seeks.

To grant a sentence reduction under Section 3582(c)(1), the Court must find that "extraordinary and compelling reasons warrant such a reduction." Under Section 3582(c)(1), courts are authorized "to consider the full slate of extraordinary and compelling reasons that an imprisoned person might bring before [the court] in motions for compassionate release." United States v. Brooker, 976 F.3d 228, 237 (2d Cir. 2020).

Here, Piña argues that he is entitled to compassionate release for three primary reasons: (1) the increased risk of exposure to COVID-19 faced by incarcerated individuals; (2) Piña's medical condition; and (3) the death of his daughter's mother. Having considered the records Piña submitted along with his letter, the Court is unpersuaded that these reasons constitute extraordinary and compelling circumstances in his case.

First, the Court is mindful of the fact that incarcerated individuals face heightened risk of COVID-19 infection. However, "the mere existence of COVID-19 in society and the possibility that it may spread to a particular prison alone cannot independently justify compassionate release." United States v. Raia, 954 F.3d 594, 597 (3d Cir. 2020); see also

United States v. Peralta, No. 19 CR 135, 2020 WL 6683095, at *1 (S.D.N.Y. Nov. 12, 2020) (same). Without demonstrating any individualized risk to himself, Piña fails to establish an extraordinary and compelling reason for release on this basis.

Second, Piña's medical conditions likewise fail to satisfy the extraordinary and compelling standard. To be sure, obesity and diabetes are among the underlying conditions that the Centers for Disease Control and Prevention has identified as creating an increased risk of serious illness from COVID-19. *Coronavirus Disease 2019 (COVID-19): People With Certain Medical Conditions*, Ctrs. for Disease Control and Prevention, <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html> (last updated Feb. 1, 2021). But the other conditions Piña lists -- including, for example, high cholesterol, back pain, prostatitis, and depression -- are not identified as risk-increasing underlying conditions. See id. Furthermore, Piña's obesity and diabetes are not enough to support his motion because the medical records he provides are from September 2019 (see attached letter at 18) and do not indicate the current status of these illnesses, nor, more importantly, do they suggest that the treatment he has received from the

Bureau of Prisons has failed to manage them. See, e.g., United States v. Mood, No. 19 CR 113, 2020 WL 3256333, at *1 (S.D.N.Y. June 16, 2020) (denying release to 53-year-old with diabetes, hypertension, and obesity where “[t]here is no question that [the defendant] has health issues, but his condition is stable and has been effectively managed by routine monitoring and medication”). Furthermore, at fifty-one years old, Piña is not in the “greatest risk” age group category. *Coronavirus Disease 2019 (COVID-19): Older Adults*, Ctrs. for Disease Control and Prevention, <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/older-adults.html> (last updated Dec. 13, 2020). Piña’s present medical condition does not, therefore, constitute an extraordinary and compelling basis to grant compassionate release.

Moreover, while the Court is mindful of the strain and hardship the pandemic has placed on many families, concern for one’s family does not typically warrant relief. See, e.g., United States v. Johnson, No. 09 CR 0272, 2020 WL 3791976, at *2 (D. Md. July 7, 2020) (finding that a defendant who cited concern for himself and his family in light of COVID-19 had not shown “extraordinary and compelling” circumstances). Although Piña initially suggested that compassionate release was warranted because his daughter’s mother had passed away,

his renewed submission indicates that his daughter is twenty-one years old. (See attached letter at 2.) The letter also suggests that his daughter lives in the United States, whereas Piña will be deported to the Dominican Republic upon his release from custody. The Court is sensitive to the difficulties Piña's family has no doubt experienced following the death of a relative. However, because Piña has not established both that his daughter is incapable of caring for herself and that Piña is the only available caretaker for her, the death of his daughter's mother does not warrant compassionate release. See, e.g., United States v. Francisco-Ovalle, No. 18 CR 526, 2021 WL 123366, at *3 (S.D.N.Y. Jan. 13, 2021) (denying release because although the defendant desired to care for his mother and sister, he did "not allege that he is their only potential caretaker").

Lastly, even if Piña had satisfied the extraordinary and compelling standard, compassionate release is not supported by the sentencing factors set forth in 18 U.S.C. § 3553(a). See 18 U.S.C. § 3582(c)(1) (stating that if the court finds extraordinary and compelling reasons warranting relief, it shall consider "the factors set forth in section 3553(a) to the extent that they are applicable"). On September 21, 2018, Piña was sentenced to 108 months' imprisonment upon pleading guilty to one count of assault in aid of racketeering. (Dkt.

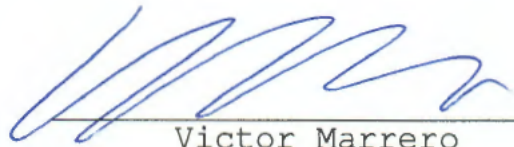
No. 376.) At his plea hearing, Piña stated that he was a member of a group involved in drug-related crimes and that, in order to maintain his position in that group, he shot someone. (Plea Tr., Dkt. No. 354, at 30:25-32:8.) Moreover, as of the date of this Order, Piña has not yet served half of the sentence imposed. (See attached letter at 40.) The Court therefore finds that release would not adequately "reflect the seriousness of the offense," or "afford adequate deterrence to criminal conduct." See 18 U.S.C. § 3553 (a) (2).

Accordingly, it is hereby

ORDERED that the motion of defendant Leonardo Piña ("Piña") for appointment of counsel to assist in the submission of a motion for compassionate release under 18 U.S.C. § 3582(c)(1)(A) is **DENIED**. The Clerk of Court is directed to mail a copy of this Order to Leonardo Piña, Register Number 21070-479, Moshannon Valley Correctional Institution, 555 Geo Drive, Philipsburg, PA 16866, and note service on the docket.

SO ORDERED.

Dated: New York, New York
3 February 2021



Victor Marrero
U.S.D.J.

01 Cr 619

12.21.2020

Honorable Judge Marrero
United States District Court
Southern District of New York
40 Centre Street
New York, NY, 10007

Honorable Judge Marrero,

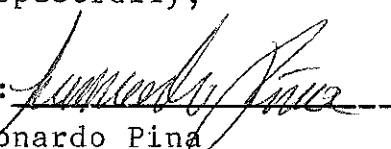
As for your previous communication by which you directed me to complete and exhaust all administrative remedies in which were available to me by GEO and the BOP, I am pleased to notify you by evidence attached herewith that the administrative process has been completed as of November 25, 2020.

I humbly request that you assign a court appointed Public defender to assist me in the next steps of filing for compassionate release pursuant to the CARES act and 18 USC 3582 c.1.A.i, as outlined in the First Step Act.

My sincere appreciation for your assistance and direction in guiding me through the process of obtaining legal representation. The severe situation of COVID-19 at GEO MVCC worsens cada dia. Please consider my medical condition that position me in a dangerous situation due to the COVID-19.

Many blessings to you and the officials of your honorable court.

Respectfully,

by: 
Leonardo Pina
BOP # 21070479, MVCC
555 GEO Drive
Philipsburg, PA, 16866

Case No. 1:01-CR-00619-VM

Attention : Honorable Judge Vicor Marrero
United States District Court
Southern District of New York
Daniel Patrick Moynihan , US Courthouse
500 Pearl Street
New York, NY, 10007

Honorable Judge Victor Marrero ,

I would like to start by giving blessings to you and the officers of the court. More over, I would like to ask for an apology , from my behalf, for what happened in the past from your honorable court and from the United States.

Honorable Judge, by this letter, I would like an opportunity, as I do not feel well. Honorable Judge, I am a new person in Jesus, and I am facing numerous medical problems .

In 1987-1988 i was treated pneumonia and my lungs had accumulated liquid and I almost died in my country. I am extremely concerned and worried with the situation in this Prison. We are 75 inmates locked in the same dormitory , on a complete lockdown, and we sleep packed, one over the other, in a congested area with 3 toilet stalls and 7 showers. The situation is grave and the COVID 19 Virus is sending every day numerous inmates and officers at the hospital and some of those are in a critical situation . This situation coupled with my numerous medical conditions can certainly result in my death, if i contract COVID.

Honorable Judge I am fighting depression due to what I have been facing during this time of my incarceration. I am under treatment from psychologist and psychiatrist and I am taking pills for my depression. (Taro MTP 25) and thanks to this treatment I feel more at ease. After the death of my daughter's mother I have been emotionally affected. Although I did not raise my daughter Jasmin because when she was born in September 20, 1999, this was the same year I went Santo Domingo, but I have always maintained an excellent communication with her Mother , Patria Rodriguez and with my daughter , as she would visit Santo Domingo for vacations and for being with me . I always give thanks to God for my family that is supporting me in this situation, especially my daughter Allondra Pina,

and my sister Beatriz Pina and Mindred Pina for their emotional and financial support.

Honorable Judge, with all the respect that you deserve, I am a person that cannot speak lies because i am a new person in Jesus Christ, I would like to underline the fact that the letter I sent you while I was in process in MCC , it was truthful and not a single word was deceitful, it was only the truth regarding what was happening.

Honorable Judge, In the Name of Jesus Christ, I would like once again to ask you for one opportunity to allow me return to my country and reunite with my lovely family and my son Sebastian who has been ten years now in this situation and my lovely daughter Sofia who was born four years after I was incarcerated , she was born in December 14, 2016 in Santo Domingo. Thanks to God I have a very responsible wife and a lovely family that support me.

Honorable Judge I have never denied that my previous life during my youth was not commendable and it was bad. I would like to ask forgiveness once again. Just by talking about the past makes feel very bad. Many years have passed since that era, and my life since that year of 1999 has changed completely and I never had any trouble, Glory to God. I sent you this letter and this picture in order to show you how my life was, a family man and a hard working person. I am also sending you my medical record for the years I have been here. I only would like for an opportunity to be reunited with my lovely family and I will not fail neither you nor my family. From now on I will dedicate my life working and supporting my family and serve Jesus.

Also, with all the respect that you deserve, I am attaching the contact info of my family for whatever additional information you might need, please contact my daughter Alondra Pina : 201-473-1208, my sister Beatriz Pina : 347-631-7542 , my sister Midred Pina 347-600-4370, and my wife in santo Domingo Zesabel Peralta : 1829-964-0316.

Honorable Judge with all the respect that you deserve, please consider the time that has passed and the time that I have in Prison, not for me, but more importantly for my family that needs me so much. I am praying for this country and all the world that are amidst this pandemic. Many blessings to you and to your family. May God bless the United States Of America, the Country that my children were born and raised to be proud Americans.

Very Respectfully, thank you for your time.

by: 

Leonardo Pina
BOP # 21070-479, MVCC
555 GEO Drive,
Philipsburg, PA, 16866

Administrative Remedy
Step 2 – Response

Date Filed: November 25, 2020

Remedy ID No.: MVCF-2020-2-093

Inmate Name: Leonardo Pina

Reg. No.: 21070-479

This is in response to your Step 2 Administrative Remedy received November 23, 2020, in which you request a Compassionate Release.

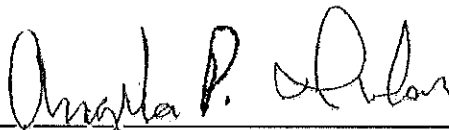
A thorough review of your request was completed. At present, your information reveals that you have a detainer. During the designation process, the Bureau of Prisons, Designation and Sentence Computation Center, applied the Public Safety Factor of Deportable Alien, due to your citizenship to Dominican Republic. Immigration and Customs Enforcement Officials lodged a detainer on April 12, 2019, for deportation proceedings.

According to Program Statement 5050.50, all detainers and holds should be resolved. Due to this information, you appear ineligible for a compassionate release at this time.

You have exhausted all of your Administrative Remedies at this level.

12/7/20

Date:



Angela Dunbar, Director of Operations



WARDEN'S OFFICE

NOV 24 2020

Correctional Programs
Administrative Remedies**MOSHANNON VALLEY CORRECTIONAL CENTER****Step 2 Administrative Remedy Form****Paso 2 Forma De Remedio Administrativo**

Name: <u>Leonardo Pina</u> Nombre:	BOP Number: <u>21070-479</u> BOP Numero:
Date: <u>Nov 13/20</u> Fecha:	Housing Assignment: Unidad Asignada:

FOR OFFICIAL USE ONLY – PARA USO OFICIAL SOLAMENTE

Date Received: <u>11-23-2020</u>	Remedy #: <u>2020-2-093</u>	Date Due: <u>12-23-2020</u>
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Complaint – Reclamo

Describe your complaint in the section below. Be as concise as possible, but be sure to include enough identifying data to assist in a thorough investigation (e.g. dates, names, locations, times, etc...) Attach one (1) additional page if necessary and the Informal Resolution Form and Step 1 response with any other supporting documentation.

Describe su telaino en la seccion de abajo. Dea lo mas breve posible, pero asegurese de incluir suficiente informacion para asistir en una completa investigacion (pe.. Fechas, nombres, ubicaciones, tiempos, etc...) Agregue una pagina si es necesario.

By Notice of this Appeal. I humbly request you review the decision rendered by the Facility administrator, L.J. Oddo.

It is my hope that a reversal of the denial for Compassionate Release / Transfer to home Confinement is given.

Thank- You

Leonardo Pina
Inmate Signature

Nov 13/20
Date



PATTERN Score:

N/A

Age and vulnerability of the inmate to COVID-19, in accordance with the CDC Guidelines:

N/A

Other Factors:

During the designation process, the Bureau of Prisons, Designation and Sentence Computation Center, applied the Public Safety Factor of Deportable Alien, due to your citizenship to Dominican Republic. Immigration and Customs Enforcement officials lodged a detainer on April 12, 2019, for deportation proceedings.

Given the above factors, it does not appear that you are eligible for Compassionate Release/Reduction in Sentence. This recommendation is non-final and may be appealed thru the Bureau of Prisons Administrative Remedy Procedures outlined in the Inmate Admission and Orientation Handbook.

It should also be noted that we are following the CDC and Bureau of Prisons Guidelines for social distancing, sanitation, education, screening of staff and inmates, and quarantine, as well as established universal precautions to every extent possible.

Sincerely,

A handwritten signature in black ink, appearing to read "P.J. Oddo".

P.J. Oddo
Facility Administrator

cc: SSIM
Contracting Officer



GEO Secure Services™
Moshannon Valley Correctional Facility
555 GEO Drive
Phillipsburg, PA 16866
Tel: 814-768-1200
www.geogroup.com

October 26, 2020

Inmate: Leonardo Pina
Reg. No.: 21070-479

Re: Letter of Request for Consideration of Compassionate Release

I write in response to the Compassionate Release/Reduction in Sentence Request received on October 22, 2020. A review of the request has been completed pursuant to Bureau of Prisons Program Statement 5050.50 dated January 17, 2019, Compassionate Release/Reduction in Sentence: Procedures for Implementation of 18 U.S.C §§ 3582 and 4202(g).

After careful review of your request, it appears that you are ineligible based on the requirements for consideration set forth by the Bureau of Prisons.

Detainer Status: ☒ Yes or No – If an inmate has an ICE Detainer or the Public Safety Factor of Deportable Alien, the inmate is ineligible for community based programs to include halfway house, home confinement, and compassionate releases; however, if a decision is made in regards to his deportation status and he is determined to be not deportable, the inmate becomes eligible for those programs.

The following section would need to be filled out on all eligible cases:

Twelve (12) month institutional history:

N/A

Verifiable release plan:

N/A

Offense History:

N/A

Security Level of Facility:

N/A



WARDEN'S OFFICE

OCT 23 2020

INMATE REQUEST TO A STAFF MEMBER PETICION DE INTERNOS PARA UN MIEMBRO INSTITUCIONAL

TO/PARA: Warden Mr. L. J. Oddo

(NAME AND TITLE OF OFFICER/NOMBRE Y TITULO DEL OFICIAL)

SUBJECT: STATE, COMPLETELY, BUT BRIEFLY, THE PROBLEM ON WHICH YOU DESIRE ASSISTANCE,
AND WHAT YOU THINK SHOULD BE DONE. (GIVE DETAILS)RAZON: ESTIPULE COMPLETO PERO BREVEMENTE EL PROBLEMA CON EL CUAL DESEA
ASISTENCIA Y LO QUE DEBE SER HECHO. (DAR DETALLES)

Mr. warden, Please find attached memorandum regarding my
compassionate release request pursuant 18 U.S.C. § 3582(c)(1)(A)(i)
and 18 U.S.C. § 3624(c)(2). Thank you for your attention to this
matter.

(USE OTHER SIDE OF PAGE IF MORE SPACE IS NEEDED.)

(USE EL ATRO LADO DE LA HOJA IS MAS ESPACIO ES NECESITADO.)

NAME/NOMBRE: Leonardo PinaNo./Numero: 210070-47921070479

CASE MANAGER: _____

DATE: 07-16-20WORK ASSIGNMENT/ASIGNACION DE TRABAJO: UnitUNIT/UNIDAD: C535 Low

NOTE: If you follow instructions in preparing your request, it can be disposed of more promptly and intelligently. You will be interviewed, if necessary, in order to satisfactorily handle your request. Your failure to specifically state your problem may result in no action being taken.

NOTA: Si usted sigue las instrucciones en preparar su peticion, puede ser dispuesta mas rapida y inteligentemente. Usted sera entrevistado si es necesario para poder manejar su peticion satisfactoriamente. Su negligencia en declarar su problema especificamente puede resultar en que no se tome alguna accion.

DISPOSITION: (DO NOT WRITE IN THIS SPACE)

DATE/FECHA: 10/27/2020

DISPOSICION: (NO ESCRIBA EN ESTE ESPACIO)

Please see attached response.

[Signature]
Officer/Official

IM-004 ATTACHMENT A

To: Warden Mr. J. L. Oddo
Facility Administrator
Moshannon Valley Correctional Institute
555 GEO Drive
Philipsburg, PA; 16866

Date : 07-15-2020

Re: Request for compassionate release to home confinement
pursuant to 18 U.S.C. § 3624(c)(2) or Compassionate Release
pursuant to 18 U.S.C. § 3582(c)(1)(A)(i) for inmate
Leonardo Pina Reg No. 210070-479.

Dear Warden,

I hereby request that you grant me compassionate release from imprisonment pursuant to 18 U.S.C § 3582 (c)(1)(A)(i), for "extraordinary and compelling reasons" or that you transfer me to home confinement for the rest of my sentence pursuant to 18 U.S.C. § 3624(c)(2) section 12003(b)(2) of the CARES Act, and attorney general Barr's April 3, 2020 Memorandum for the Director of the Bureau of Prisons, "Increasing the Home Confinement at Institutions Most Affected by COVID-19.

Generally applicable support for my request is outlined below. In addition, the following factors specific to me demonstrate that I should be granted compassionate release or transferred to a home confinement.

More specifically I have the following conditions which place me at heightened risk for infection or severe illness, according to the CDC:

I am over 50 years old and I have been diagnosed with several issues.

I have high Total Cholesterol

Triglycerides High Flag Value

Low HDL Cholesterol

VLDL Cholesterol

Attorney General Memorandum for the Director of Bureau of Prisons
"Increasing Use of Home Confinement at Institutions most Affected
by COVID-19 (April 3, 2020) available at
<https://justice.gov/file/1266661/download>

High LDL Cholesterol

Possible Familial Hypercholesterolemia.

I suffer from Type 2 diabetes mellitus

Obesity

Other disorders of optic nerve OU ONH cupping

Low back pain

Disorder of refraction

Disorder of Urinary System

Disorder of prostate, unspecified prostatitis

Unspecified injury of thorax

Musculoskeletal chest wall pain

Body mass index (BMI) 34.0 - 34.9

I was severely attacked in the premises of this institution and got injured at the head, and the lips. I was attacked for no reason. As a result of this attack I was taken to the emergency room. I have been (since then) suffering from headaches , and the trauma (phsychological) that I experienced during this groundless attacks. I suffer from dizzyness on a daily basis. My lips where bruised and swollen for days. I have been also suffering from Nasal congestions.

I have also been suffering from a Right ankle injury that took place in this facility as well.

I have suffered pain, and i do not believe this facility is very safe.. During the winter time, I slept while walking outside and fell. I had my ankle injured and severely sprained. I had to wear a boot.

I am enclosing part of my lengthy medical file as Exhibit for your review. The entire medical record is at your disposal.

I am a resident of Pod C5. We are crowded , up to 78 people, with no space to sit down, not enough chairs. We share 3 bathroom stalls and 7-8 showers. It is very often that there is a line of inmates to use the bathrooms and as you can understand there is lots of frustration.

We have been unable to practise social distancing because there is not enough space in the Unit. That puts me into a very dangerous situation. The bunks are next to each other and there is no way to stay 6 feet apart from each other.

In the April 3 Memorandum noted above, the Attorney General formally directed the BOP "immediately review all inmates who have COVID-19 risk factors, as established by the Centers for Disease and Prevention - CDC... "because he has found that COVID-19 has created an emergency conditions that are materially affecting the functioning of BOP. To be clear, the Attorney General thus directed the BOP to review all at risk inmates- not only those who are previously eligible for transfer, pursuant to §3624(c)(2). But conditions merit transfer to home confinement or release to even more inmates. Even those younger than 65 and/or otherwise healthy patients are not immune from infection or serious complications. According to the CDC, nearly 40% of patients hospitalized from coronavirus were 20 to 54 years old. As of March 16, 2020, more than half of these hospitalized and nearly half of those admitted to an Intensive care unit were under the age of 65. The Intensive care National Audit and research center in London reports 45.8% of those between the ages of 50-69 admitted to critical care, died in critical care. Data from China reflects that people over the age of 50 (like me) face greater risk of serious illness or death from COVID-19.

(Available at <https://medrxiv.org/content/10.1101/2020.03.17.20037572v1>)
 At Moshannon Valley Correctional Institute, there is no way to know (since there is no official number on the web site) how many cases we truly have. But this is not the end of the deliberation process. First, there may be zero positive results reported - but we have no idea how many inmates (if any) have been tested. It is my understanding that no inmates have been tested for COVID-19. If there are no positive results because there have been no tests, then that statistic is meaningless. see United States v. Amarrah, 17 Cr. 20464, 2020 WL 2220008, *3, *6 (E.D. Mich. May 7, 2020) (concluding that "zero confirmed COVID-19 case is not the same as zero COVID-19 cases" because "it is unclear whether or to what extent FCI Loretto is testing the existing inmate population") (emphasis in original)

In short, the virus puts every incarcerated person or BOP staff member at significant risk of infection. This also places the general community at risk because every infection can lead to several more , including those in the community who come into contact with the GEO staff who may not show any sign of the infection yet still be contagious. Transferring me to home confinement or releasing me will decrease the population and risk at this GEO facility and will reduce the risk of infection and strain on the surrounding community, without endangering the greater community.

With clean hands and in good gaith, I ask you to immediately consider my case for transfer to home confinement, or for compassionate release, and that you transfer or release me. Thank you for your consideration.

Respectfully submitted by : Leonardo Pina

Leonardo Pina
BOP # 210070-479, MVCC
555 GEO Drive
Philipsburg, PA, 16866

EXHIBIT 1 --- MEDICAL RECORD(S)



The GEO Group, Inc.

MICHANNON VALLEY CENTER

21070-479

PINA, LEONARDO

DOB: 03-18-1969

ARSD: 09-13-2019 MVCF

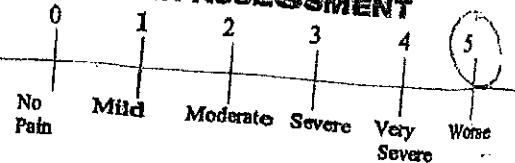
NAME:

B.O.P.#:

ALLERGIES:

None

PAIN ASSESSMENT



DATE/TIME:

Doctor/ Nurse Practitioner Visit:

-Sick Call Follow-Up, /-NP F/U, MD F/U

Date Request Written: 6-19-20

Reason: disc w/ 6-20 x-ray:

Interpreter #: 357730

MARION #

disc restrictions

S: "My foot feels better"

O: VS: T 96.2 P 102 R 16 BP 110/74

SPO2 96

WT 217#

PAIN 5 / 0-5

No distress. A+Ox3. Patient presents for xray followup. WNL. Mouth discurd. Patient state (R) ankle & foot is feeling better. Today he states that he has been getting daily tension like headache and nasal congestion. On exam he has a perforated septum. Nares patent. TMs clear without effusion. Lungs clear to auscultation.

A: Right ankle fracture. General exam stable.

IMPRESSION:

see above please.

P/E:

- ① Zyrtec 1mg 1 tab po daily x 30 days.
- ② COP CTM given.
- ③ see updated duty status.
- ④ Camboot returned.

Verbalized understanding.

Noted 6/19/20

K. Corrigan, LPN
MVCFC. Gonder, PA-C
MVCF

MOSHANNON VALLEY CENTER

PINA, LEONARDO

DOB: 03-18-1969

ARSD: 09-13-2019 MVCC

B.O.P. #:

ALLERGIES:

NKDA

"DO NOT USE" ABBREVIATION LIST:

U, IU, O.D., O.O.D., ghs, S.C., cc, TRAILING ZERO AFTER A DECIMAL

S.O.A.P. E. NOTE

DATE / TIME	S.O.A.P. E. NOTE
12/19/19 1905	S: "I'm good but my ankle hurts."
T 47'	O: Inmate returned from outside emergency
P 68	room visit. Inmate pleasant complaints
R 18	of right ankle pain 4/5. Capillary refill less than
BP 130/80	3 seconds and pedal pulses strong bilaterally.
02 SAT 98i.	Neurovascular checks WNL. Right ankle with
WT unable	soft air splint support. Penn Highlands cleared ER
PAIN 4 10-5	phoned and they verified there is no metal
right ankle	in the soft air support.
	A: Alteration in comfort related to right ankle
	sprain
12/20/19 0600	P: PA Gonder notified of emergency room evaluation
	and inmates assessment findings. Verbal telephone orders
	① Motrin 800mg po tid prn pain x 2 weeks. (given ibuprofen 200mg quantity 18-kap)
	② Crutches x 3 weeks ③ Soft air support right ankle x 3 weeks (Right foot bearing)
	④ Xray right ankle in 2 weeks or when available
	⑤ Follow up with provider in 1 week. Verified and read
	back x 2. Inmate instructed on crutch training. Crutches issued.
	F: Inmate verified understanding. Inmate released back to unit - escorted
	by officer.



Patient Register

Specimen ID: 063-844-0149-0

Acct #: 37827370

Phone: (814) 768-1258

Rte: 00

Control ID: B0099830261

PINA, LEONARDO

Moshannon Valley Correctional

550 Geo Dr.

PHILIPSBURG PA 16866



Patient Details

DOB: 03/18/1969
Age(y/m/d): 050/11/14
Gender: M SSN:
Patient ID: 21070-479

Specimen Details

Date collected: 03/03/2020 0504 Local
Date received: 03/03/2020
Date entered: 03/03/2020
Date reported: 03/04/2020 0707 ET

Physician Details

Ordering: D REVAK
Referring:
ID:
NPI: 1013029503

General Comments & Additional Information

Alternate Control Number: B0099830261

Total Volume: Not Provided

Alternate Patient ID: 21070-479

Fasting: Yes

Ordered Items

Comp. Metabolic Panel (14); Lipid Panel

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Comp. Metabolic Panel (14)					
Glucose	97		mg/dL	65 - 99	01
BUN	19		mg/dL	6 - 24	01
Creatinine	1.24		mg/dL	0.76 - 1.27	01
eGFR If NonAfrican Am	67		mL/min/1.73	>59	
eGFR If African Am	78		mL/min/1.73	>59	
BUN/Creatinine Ratio	15			9 - 20	
Sodium	142		mmol/L	134 - 144	01
Potassium	4.9		mmol/L	3.5 - 5.2	01
Chloride	103		mmol/L	96 - 106	01
Carbon Dioxide, Total	23		mmol/L	20 - 29	01
Calcium	9.7		mg/dL	8.7 - 10.2	01
Protein, Total	7.0		g/dL	6.0 - 8.5	01
Albumin	4.3		g/dL	4.0 - 5.0	01
Globulin, Total	2.7		g/dL	1.5 - 4.5	
A/G Ratio	1.6			1.2 - 2.2	
Bilirubin, Total	0.2		mg/dL	0.0 - 1.2	01
Alkaline Phosphatase	94		IU/L	39 - 117	01
AST (SGOT)	21		IU/L	0 - 40	01
ALT (SGPT)	29		IU/L	0 - 44	01
Lipid Panel					
Cholesterol, Total	271	High	mg/dL	100 - 199	01
Triglycerides	388	High	mg/dL	0 - 149	01
HDL Cholesterol	36	Low	mg/dL	>39	01
VLDL Cholesterol Cal	78	High	mg/dL	5 - 40	
LDL Cholesterol Calc	157	High	mg/dL	0 - 99	

01 CB

LabCorp Dublin

6370 Wilcox Road, Dublin, OH 43016-1269

Dir. Vincent R. Rocchi, PhD

David M. Revak, D.O.

Date Issued: 03/04/2020 0711 ET

FINAL REPORT

Page 1 of 2

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**Bureau of Prisons
Health Services
Inmate Intra-system Transfer**

Reg #: 21070-479

Inmate Name: PINA, LEONARDO

SENSITIVE BUT UNCLASSIFIED – This information is confidential and must be appropriately safeguarded.

Transfer To: MVC

Transfer Date: 09/13/2019

Health Problems

<u>Health Problem</u>	<u>Status</u>
LTBI Prophylaxis Refused	Current
Type 2 diabetes mellitus	Current
Hemoglobin A1C H 6.6 drawn 11/14/18	
Obesity	Current
Hyperlipidemia, unspecified	Current
Other disorders of optic nerve	Current
OU ONH cupping	
Unspecified disorder of refraction	Current
Low back pain	Current
Disorder of urinary system, unspecified	Current
Disorder of prostate, unspecified	Current
prostatitis	
Unspecified injury of thorax	Current
Musculoskeletal chest wall pain	
Body mass index (BMI) 34.0-34.9, adult	Current

Medications: All medications to be continued until evaluated by a physician unless otherwise indicated.
Bolded drugs required for transport.

Atorvastatin 10 MG Tab Exp: 09/20/2019 SIG: Take one tablet (10 MG) by mouth each evening for control of cholesterol #1
 Tamsulosin HCl 0.4 MG Cap Exp: 09/20/2019 SIG: Take one capsule (0.4 MG) by mouth each evening #1

OTCs: Listing of all known OTCs this inmate is currently taking.

None

Pending Appointments

<u>Date</u>	<u>Time</u>	<u>Activity</u>	<u>Provider</u>
08/22/2019	00:00	14 Day Dr Eval	Physician 01
10/23/2019	00:00	MLP Chronic Care Follow up	MLP 02
04/25/2020	00:00	Chronic Care Visit	Physician
05/29/2020	00:00	Optometry Exam	Optometrist

TB Clearance: Yes

Last PPD Date: 01/15/2018

Last Chest X-Ray Date: 01/25/2018

TB Treatment:

TB Follow-up Recommended: No

Induration: 15mm

Results: **NEGATIVE**

Sx free for 30 days: Yes

Sickle Cell:

Sickle Cell Trait/Disease: No

Limitations/Restrictions/Diets:

Cell: lower bunk --- 08/22/2020

Cleared for Food Service: Yes

MDS Comments: S/P knee aspiration - Bottom bunk

Comments:

Specimen ID: 347-844-0067-0
Control ID: B0097274552

Acct #: 37827370

Phone: (814) 768-1258

Rte: 00

PINA, LEONARDO

Moshannon Valley Correctional
550 Geo Dr.
PHILIPSBURG PA 16866



21070-479

Patient Details

DOB: 03/18/1969
Age(y/m/d): 050/08/25
Gender: M SSN:
Patient ID:

Specimen Details

Date collected: 12/13/2019 0505 Local
Date received: 12/13/2019
Date entered: 12/13/2019
Date reported: 12/14/2019 0306 ET

Physician Details

Ordering: D REVAK
Referring:
ID:
NPI: 1013029503

General Comments & Additional Information

Alternate Control Number: B0097274552
Total Volume: Not Provided

Alternate Patient ID: Not Provided
Fasting: Yes

Ordered Items

Lipid Panel

TESTS	RESULT	FLAG	UNITS	REFERENCE	INTERPRET
Lipid Panel					
Cholesterol, Total	284	High	mg/dL	100 - 199	01
Triglycerides	204	High	mg/dL	0 - 149	01
HDL Cholesterol	39	Low	mg/dL	>39	01
VLDL Cholesterol Calc	41	High	mg/dL	5 - 40	
LDL Cholesterol Calc	204	High	mg/dL	0 - 99	

Comment:

Possible Familial Hypercholesterolemia. FH should be suspected when fasting LDL cholesterol is above 189 mg/dL or non-HDL cholesterol is above 219 mg/dL. A family history of high cholesterol and heart disease in 1st degree relatives should be collected. J Clin Lipidol 2011;5:133-140

01 CB

LabCorp Dublin
6370 Wilcox Road, Dublin, OH 43016-1269

Dir: Vincent Ricchluti, PhD

For inquiries, the physician may contact Branch: 814-943-3115 Lab: 800-282-7300

B. Shaw, CRNP
MVCF

David M. Revak, D.O.
MD/CC

DEC 16 2019
[Signature]

FINAL REPORT

Date Issued: 12/14/19 0311 ET

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The GEO Group, Inc.

MOSHANNON VALLEY CENTER

21070-479

PINA, LEONARDO

DOB: 03-18-1969

ARSD: 09-13-2019 MVCF

NAME:

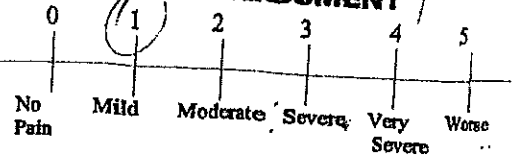
B.O.P. #:

ALLERGIES:

Nicox

CS 35

PAIN ASSESSMENT



DATE/TIME:

Doctor/ Nurse Practitioner Visit:

-Sick Call Follow-Up

-NP F/U

MD F/U

Date Request Written:

5-27-20

Reason:

Headaches

Interpreter #:

350205

patient #

S:

"I am getting severe HA at night"

O: VS: T 98.4 P 90 R 16 BP 117/86 SPO2 97 WT 215 PAIN 1 / 0-5

No distress. A x O x 3. Patient here for sick call followup for recent complaints of headaches. Patient ^{not} supposed to be ambulating without ambipod. States he has been getting severe (R) sided headache behind head ear. States no gets HA everyday. Exam: PERLA. Cranial nerves 2-12 intact. No pronator drift. States Motrin helps HA. Denies nausea, vomiting.

A: Headaches

IMPRESSION:

See above please.

P/E:

- ① Continue with current treatment plan.
- ② FU in 4 weeks for HA.

Noted 10/3/20
0936
K. Corrigan, APRN
MVCF

Verbalized Understanding

C. Gonder, PA-C
MVCF

06/03/2021
0936



CORRECTIONAL HEALTHCARE SERVICES
NURSING ASSESSMENT PROTOCOLS

21070-479

PINA, LEONARDO

DOB: 03-18-1969

ARSD: 09-13-2019 MVCF

FACILITY: MVCF

HEADACHE PROTOCOL

DOB:

Number:

☐ Interpreter used? ☐ Yes ☒ No Interpreter number NA

SUBJECTIVE: Chief Complaint (acute symptoms):

Allergies:

"I have headaches every night"Sick Call ☒ Routine ☐ Urgent ☐ Walk-In ☐ Self-declared Emergency ☐ True EmergencyTime of onset: since december Activity at onset: NADuration: intermittentPain location: ☐ Frontal ☒ Parietal ☐ Occipital ☐ GeneralizedPain intensity: (Scale 0-10) 8One Sided or Equal: R side Sun/heat exposure: NACharacter: ☐ stabbing ☐ burning ☐ sharp ☐ dull ☐ throbbing ☒ poundingHistory: ☐ hypertension ☐ stroke ☐ diabetes ☐ migraines noCurrent medications (OTC & Rx) see medAny relief from meds: ☒ Yes ☐ NoAssociated symptoms: ☐ fever ☐ chills ☐ diarrhea ☐ nausea ☐ vomiting ☐ sinus congestion☐ sensitivity to light ☐ neck pain/difficulty in flexing head forward noneChange in vision: noRecent head injury: no - was punched in head in December per inmateVisual acuity: NA OD NA OS NA OU no vision☐ Numbness NA ☐ Tingling: Location: NA Loss of consciousness (how long): no changeDizziness: noOBJECTIVE BP: 112/71 P: 84 R: 18 T: 97.9 Weight: 210 O2 Sat: 98Respiratory rhythm: even unlabored Heart Sounds: regularMental status/orientation: alert oriented x3Right pupil: Size: 3 mm Shape: round or irregular Reactivity: ☒ rapid ☐ sluggish ☐ absentLeft pupil: Size: 3 mm Shape: round or irregular Reactivity: ☒ rapid ☐ sluggish ☐ absentGait: ☒ steady ☐ slightly unsteady ☐ unable to standIf diabetic, Glucometer result: NAHand grips: strongPedal pulses: strongSkin: ☒ Normal ☐ Pale ☐ Flushed ☐ Cyanotic ☐ DiaphoreticAble to touch chin-to-chest with mouth closed: yesEvidence of trauma: ☐ swelling ☐ abrasion ☐ laceration ☐ contusion noneASSESSMENT: Alteration in comfort related to headache

PLAN:

1. Notify MD/NP/PA immediately if there is recent history of head injury, abnormal vital signs, abnormal blood sugar, nausea, vomiting, abnormal neurological findings, mental confusion or sensitivity to light. Consider transfer to higher level of care.
2. If visual acuity is greater than 20/50, refer for optometry exam.
3. Refer to next MD/NP/PA sick call.
4. Disposition: ☒ dorm ☐ infirmary ☐ observation ☐ transfer to ER
5. Offer Acetaminophen 325 mg, two tabs BID, P.O. X 3 days (administer 6 pre-packaged packets as KOP) OR Offer Ibuprofen 200 mg, two tabs TID P.O. X 3 days (administer 9 pre-packaged packets as KOP). refused - has pain
6. If medication is given, complete form HS-146 and place on chart behind the Nursing Assessment Protocol.

Passes issued: 1AD

EDUCATION: Instructed on factors that trigger headaches and on stress reduction techniques.

☒ Patient verbalized understanding of above instructions. per sick callNursing Signature: [Signature]S. Sankey
MVCFDate: 5/29/20

Print/Stamp Name:

Time: 1130



CORRECTIONAL HEALTHCARE SERVICES NURSING ASSESSMENT PROTOCOLS

21070-479

PINA, LEONARDO

DOB: 03-18-1969

ARSD: 09-13-2019 MVCF

TY: _____

ABDOMINAL PAIN PROTOCOL

DOB: _____

Number: _____

☐ Interpreter used? ☒ Yes ☐ No Interpreter number 3516443

SUBJECTIVE: Chief Complaint:

My back + arm hurt, I took Ibuprofen + got nauseous. I feel like puking. my pain.

Select one: Sick Call ☐ Routine ☐ Urgent ☐ Walk-In ☐ Self-declared Emergency ☒ True Emergency

Date & Time of onset: tonight Allergies: N/A

History of: No Ulcers ☐ Gallbladder disease ☐ Appendicitis ☐ Recent abd surgeries ☐ Recent weight change (# lbs.) Inmate has just started working out - 1 lb

Activity at onset: Nothing After eating does pain: ☐ Increase ☐ Decrease ☒ Remain the same did 100+ pushups

Current Medications: Hei MalAlleviating Factors: Nothing

Pain Character: ☒ Cramping ☒ Stabbing ☐ Burning ☐ Sharp ☐ Dull Pain Location: mid back, arms, legs, and epigastric.

Pain Intensity: (Scale 0 - 10) 9/10 Flares Yes/No ☒ Yes ☐ No

Radiation: ☒ Yes ☐ No Duration: ☒ Constant ☐ Intermittent

Last BM: today Consistency: normal

Amount: mod Blood if yes ☐ NO Red ☐ NO Black ☐ NO Maroon ☐ NO How much: NONE

Constipation: NO

Heartburn or indigestion: yes Frequently ☐ Occasionally ☒ N/A

Degree: ☒ Mild ☐ Mod ☐ Severe

Urinary frequency: NO Burning ☐ NO Penile/Vaginal discharge ☐ NO Low back pain

Dietary Habits: Fat Intake: mod Alcohol Intake: NONE Caffeine Intake: mild

Smoking Habits: NONE

OBJECTIVE: BP: 117/83 P: 76 Normal/weak/bounding: ☐ R: 17 T: 97 Weight: 210 O2Sat 98

Bowel sounds: ☒ Normal ☐ Hypo ☐ Hyper ☐ Absent Present in all 4 quadrants: ☒ Yes ☐ No Guarding: ☐ NO

Rebound Tenderness: ☐ NO ☐ NO Jaundice ☐ NO If states blood in stool, do Hemocult Results: N/A

Pain Location: epigastric back arm, leg.

Description of observed stool: "normal" per inmate.

More comfortable: ☒ Lying ☐ Sitting ☐ Standing Able to sit still: ☐ NO

Skin Turgor: ☒ Normal (warm & dry) ☐ Pale ☐ Flushed ☐ Cyanotic ☐ Diaphoretic

Overall appearance: ☐ No acute distress ☒ Mild distress ☐ Severe distress ☐ Obvious anxiety:

ASSESSMENT: Alteration in comfort related to arm and back pain

PLAN: May offer choice of Antacid, Milk of Magnesia, Pentobismuth, Dulcolax, Bulk Laxative

Type: Pepto Dose: 1/2 KeP packets Give according to label instructions

*If fever above 100.4 F, nausea or vomiting accompanying blood in stool, all HIV and patients with diarrhea that lasts longer than 24 hours after treatment, or if patient does appear ill, and there is pain upon palpation, the MD/NP/PA must be notified for specific orders.

EDUCATION: Food & Ibuprofen Tylenol in property for pain, Camboot for foot pain as ordered.

- Instructed to avoid spicy foods, caffeine and high fat snacks. Chew slowly & thoroughly, and drink 6-8 glasses of water daily.
- Instructed not to lie down at least 2 hours after eating.
- Instructed on stress relief measures, high fiber diet, and adequate exercise.
- Return if symptoms persist or worsen.

Patient verbalized understanding of above instructions.

Nursing Signature

Date: 4-24-20

Print/Stamp Name:

C. Frelin, RN

Time: 2005

MVCF

21070-479

NAN

DOB: 03-18-1969

B.O.

ARSD: 09-13-2019 MVCF

ALLERGIES:

WKDA

U, IU, Q.D., Q.O.D., qhs., S.C., cc. **TRAILING ZERO AFTER A DECIMAL**

[illegible]



The GEO Group, Inc.

MOSHANNON VALLEY CENTER

21070-479

PINA, LEONARDO

DOB: 03-18-1969

ARSD: 09-13-2019 MVCF

NAME:

B.O.P. #:

ALLERGIES:

NKDA

PAIN ASSESSMENT

0 1 2 3 4 5

No
Pain

Mild

Moderate

Severe

Very
Severe

Worse

"DO NOT USE" ABBREVIATION LIST:

U, IU, O.D., Q.O.D., qhs., S.C., cc, TRAILING ZERO AFTER A DECIMAL

S.O.A.P. E. NOTE

DATE/TIME

Admin Note/Order:

4/10/20

1320

Due to modified movement and total compound lock down, todays appointment will be rescheduled next available.

8. B. Shaw, CRNP
MVCF

B. Shaw, CRNP
MVCF

S. Hahn, RN
MVCF

47020
1400

home (4) stool

CS 4L



**Moshannon Valley Correctional
Facility**

Printed: 02/21/20 10:07

**Subject Visitor List For
PINA, LEONARDO(21070-479)**

STATUS : APPROVED

<u>Full Name</u>	<u>Children</u>	<u>Relationship</u>	<u>Visitation Type</u>
PERALTA-QUERO, JEZABEL	829-964-0316	WIFE	CONTACT 829-964-0316
PINA, ALONDRA		DAUGHTER	CONTACT 201-473-1208
PINA, BEATRIZ	0	SISTER	CONTACT 347-631-7542
PINA, JASMINE	0	DAUGHTER	CONTACT 917-259-0590
PINA, JASMINE		DAUGHTER	CONTACT
PINA, LIBERTAD		MOTHER	CONTACT 201-580-7464
PINA, MILDRED		SISTER	CONTACT 347-600-4370
RODRIGUEZ, PATRICIA		CHILD MOTHER	CONTACT

↓
Jasmin's mother
who passed away
in 2020 from Covid-19.

**Moshannon Valley Correctional
Facility****Subject Visitor List For
PINA. LEONARDO(21070-479)****STATUS : APPROVED**

<u>Full Name</u>	<u>Children</u>	<u>Relationship</u>	<u>Visitation Type</u>
PERALTA-QUERO, JEZABEL	0	WIFE	CONTACT
PINA, ALONDRA		DAUGHTER	CONTACT
PINA, BEATRIZ	0	SISTER	CONTACT
PINA, JASMINE	0	DAUGHTER	CONTACT
PINA, LIBERTAD		MOTHER	CONTACT
PINA, MILDRED		SISTER	CONTACT



Los últimos nueve meses todos han sido muy proactivos en la prevención de cualquier caso de COVID que ingrese a las instalaciones. Recientemente, ha habido un aumento en los casos locales de coronavirus de AP. Hemos visto un aumento en los casos positivos de personal y reclusos en esta instalación. Hemos podido aislar cualquier caso sospechoso de COVID-19 dentro de la instalación (entre personas encarceladas / detenidas, personal o visitantes que han estado adentro recientemente), continuaremos las estrategias de gestión mientras los resultados de las pruebas estén pendientes. Las estrategias de manejo esencial incluyen colocar casos y personas con síntomas bajo aislamiento médico, poner en cuarentena a sus contactos cercanos y facilitar la atención médica necesaria, mientras se observan los protocolos relevantes de control de infecciones y desinfección ambiental y se usa el equipo de protección personal recomendado.

La Administración se asegurará de que las personas encarceladas / detenidas reciban evaluación y tratamiento médicos ante los primeros signos de los síntomas del COVID-19. La evaluación médica inicial debe determinar si un individuo sintomático tiene mayor riesgo de enfermedad grave por COVID-19.

Continuamos monitoreando el sitio web de los CDC para obtener una lista completa, y verificamos regularmente las actualizaciones a medida que haya más datos disponibles para informar este problema. El personal que evalúa y brinda atención para casos confirmados o presuntos de COVID-19 seguirá la Guía clínica provisional de los CDC para el manejo de pacientes con enfermedad por coronavirus confirmada (COVID-19) y supervisará el sitio web de la guía con regularidad para obtener actualizaciones de estas recomendaciones.

Algunas cosas para recordar para ayudar a estar seguro:

- Distanciamiento social: significa mantener un espacio entre usted y otras personas.
- Los expertos creen que el virus se transmite principalmente a través de gotitas que salen de la boca y la nariz de una persona. Cuando una persona habla, exhala, tose o estornuda, las gotas viajan alrededor de 3 a 6 pies antes de caer al suelo.

Además, continúe con sus mayores esfuerzos en materia de higiene, higiene de manos y etiqueta para la tos y el uso de una máscara. Estas son las herramientas que le ayudarán a mantenerse saludable. La seguridad del personal y de los presos sigue siendo mi prioridad número uno.

Puedo asegurarles que seguiremos las pautas y recomendaciones de los CDC para los reclusos encarcelados afectados por el virus.

Además, debido a la cantidad de trabajadores reclusos que se encuentran en estado de cuarentena, los miembros del personal han estado trabajando en el Servicio de Alimentos y Lavandería para mantener los servicios en todas las instalaciones. Anticipamos que en un futuro cercano, podremos levantar el estado de cuarentena de las unidades y devolver a los presos a sus asignaciones de trabajo.

01/04/19

Honorable Judge Marrero,

Please find attached some photos of my wonderful family,
that includes my wife, my brother, my sister my wonderful children,
the grandmother of my wife, the godfather and godmother of my children
my all my wonderful children.



This is the day of my daughter's Sofia baby shower in Santo Domingo in October 2016. Me and my wife Isabel

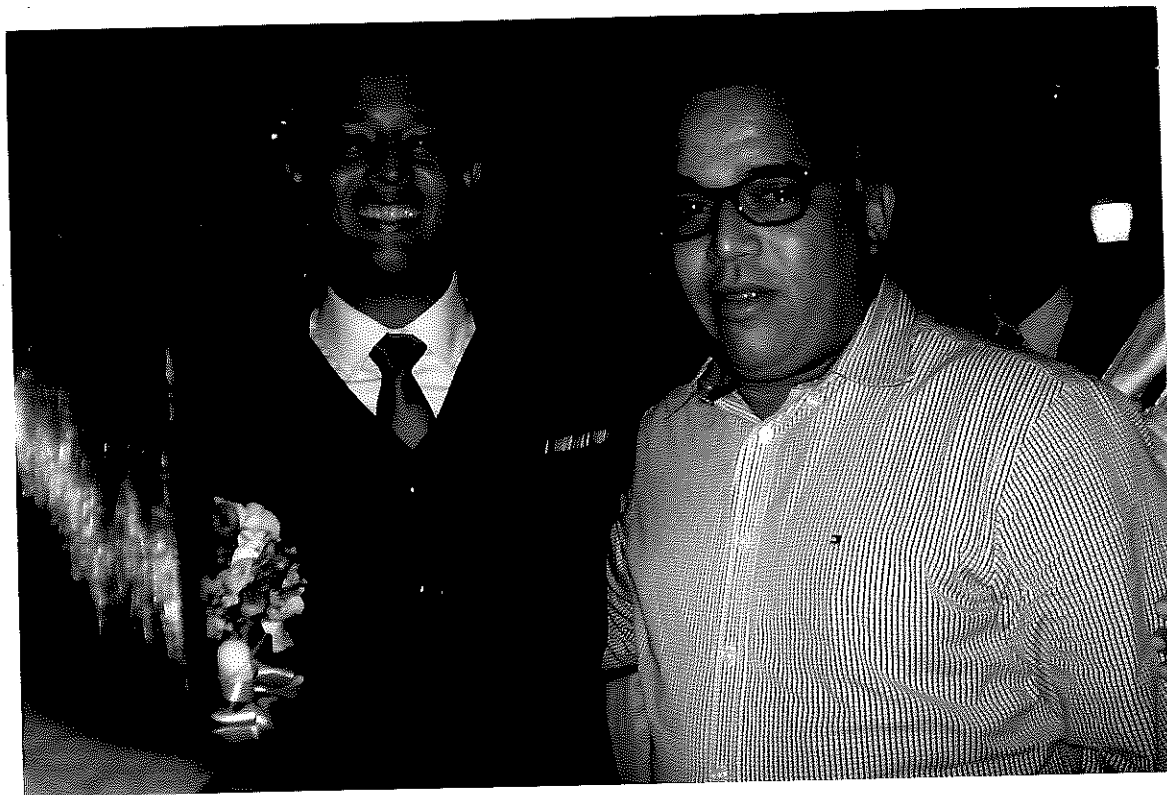


This picture was taken in 2013 in Santo Domingo, the day of my marriage. We had been together since 2003. In the middle is my son Sebastian who was at the time 4 years old.

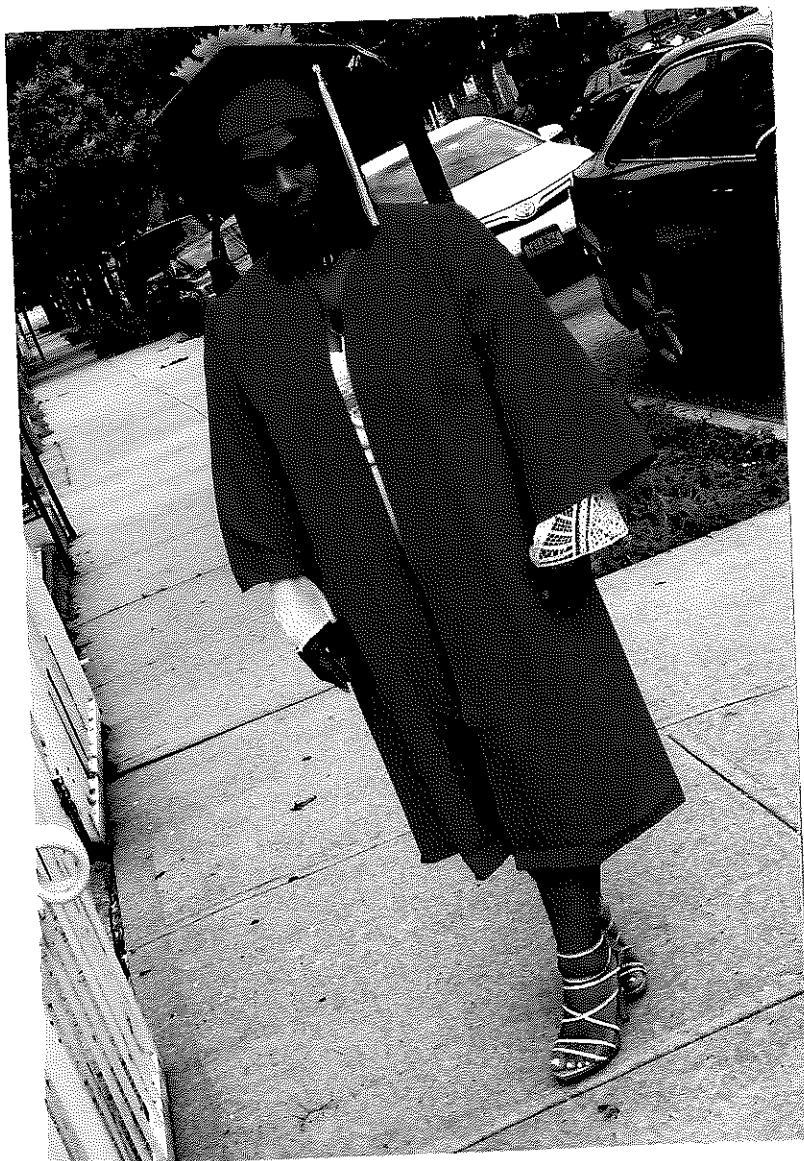


From Left to Right:
The Godmother of my daughter Sofia
The Godfather of my daughter Sofia
(Rosa and Phillis)
My wonderful son Sebastian.
Sofia's brother.
Sebastian is 11 years old
Sofia is 4 years old
My beautiful wife Jezebel
Peralta-Queto

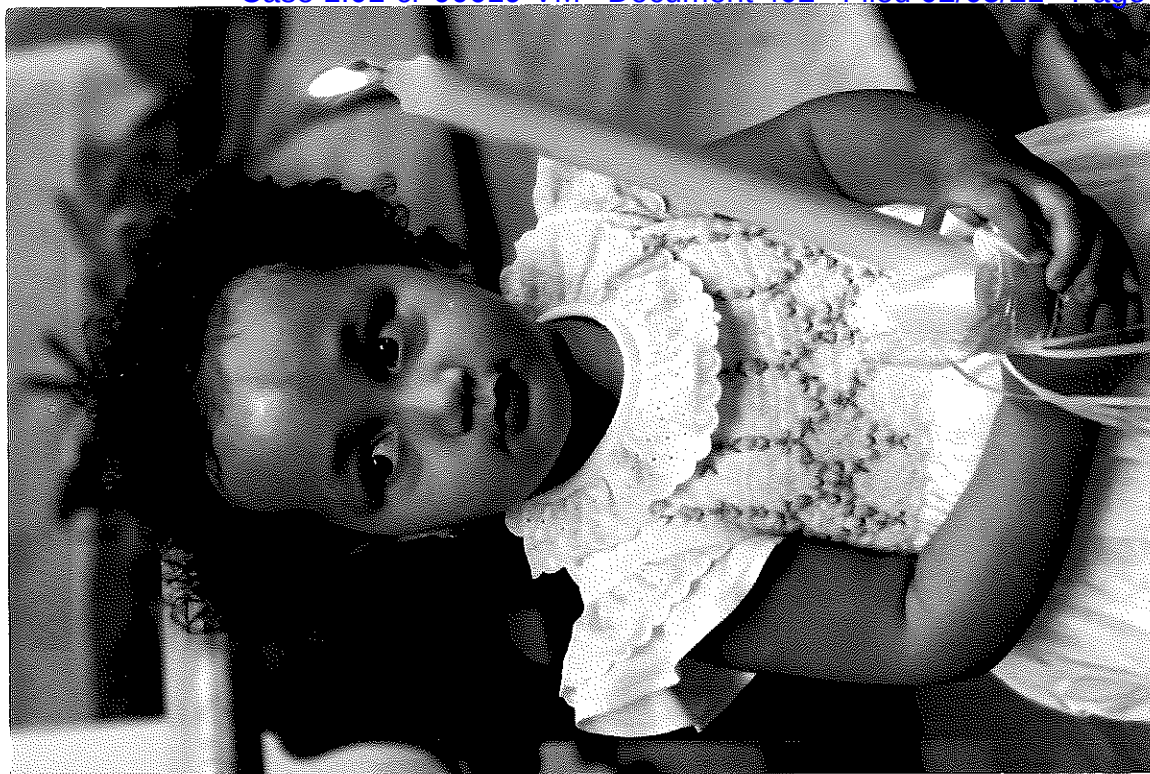
This picture was taken in Santo Domingo, during the Baptism of my daughter Sofia.



From Left:
My son, Carlos
Me, Leonardo
This is the day of
my son's marriage
in Santo Domingo



This is my adorable daughter Jasmin Pina, the day of her graduation. Jasmin's mother passed away in March 2019, from COVID-19



My Sofia, the day of her Baptism
in 2019



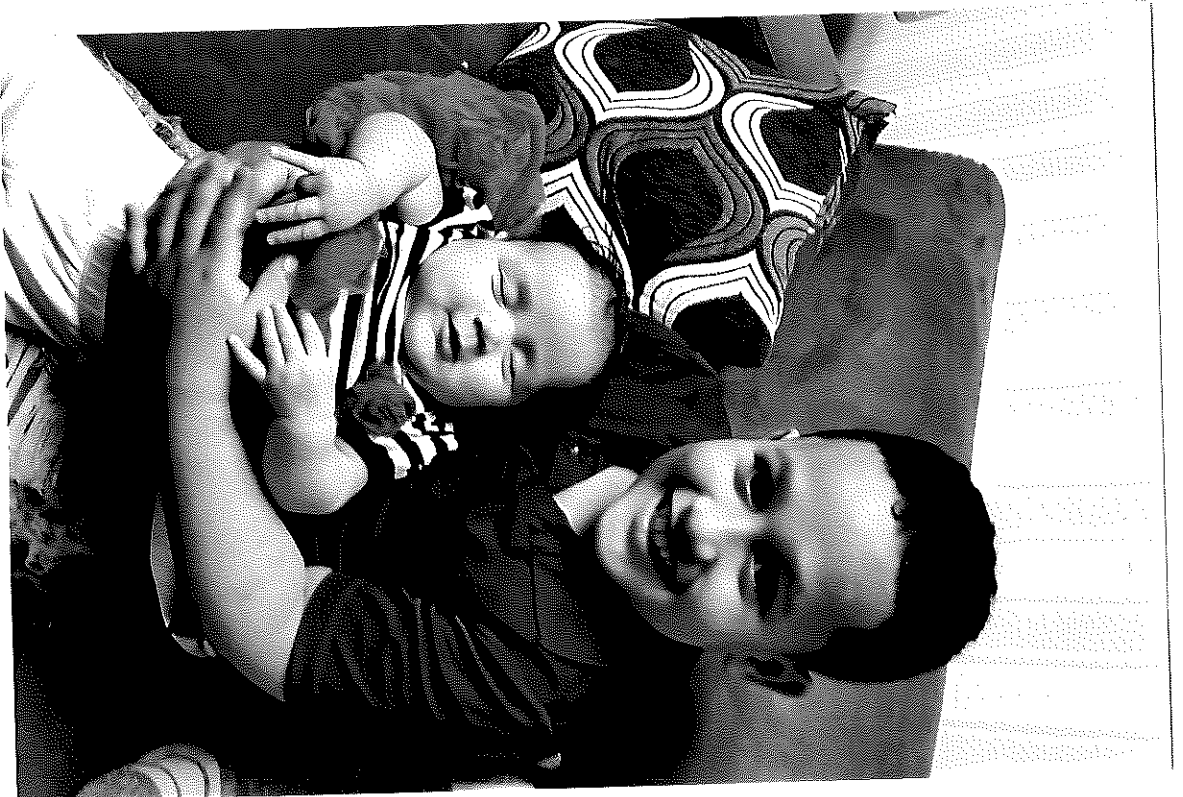
One of my Princesses, Sofia,
and my wife Isabel.

Both pictures were taken the day of Sofia's baptism
in Santo Domingo.

The new born Sofia with my older son Carlos.



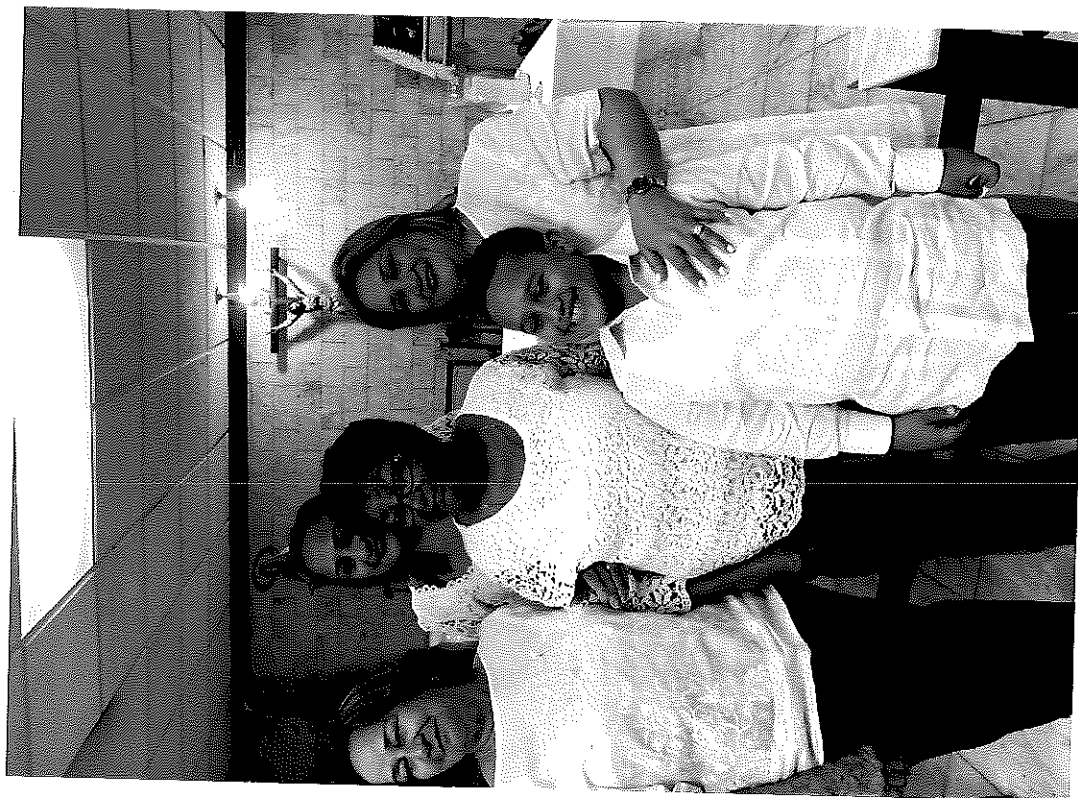
This is once again the newly born Sofia with my son Sebastian.





My wife and my daughter Sofia
the day of Sofia's baptism.
In 2019.

Both pictures taken in Santo Domingo

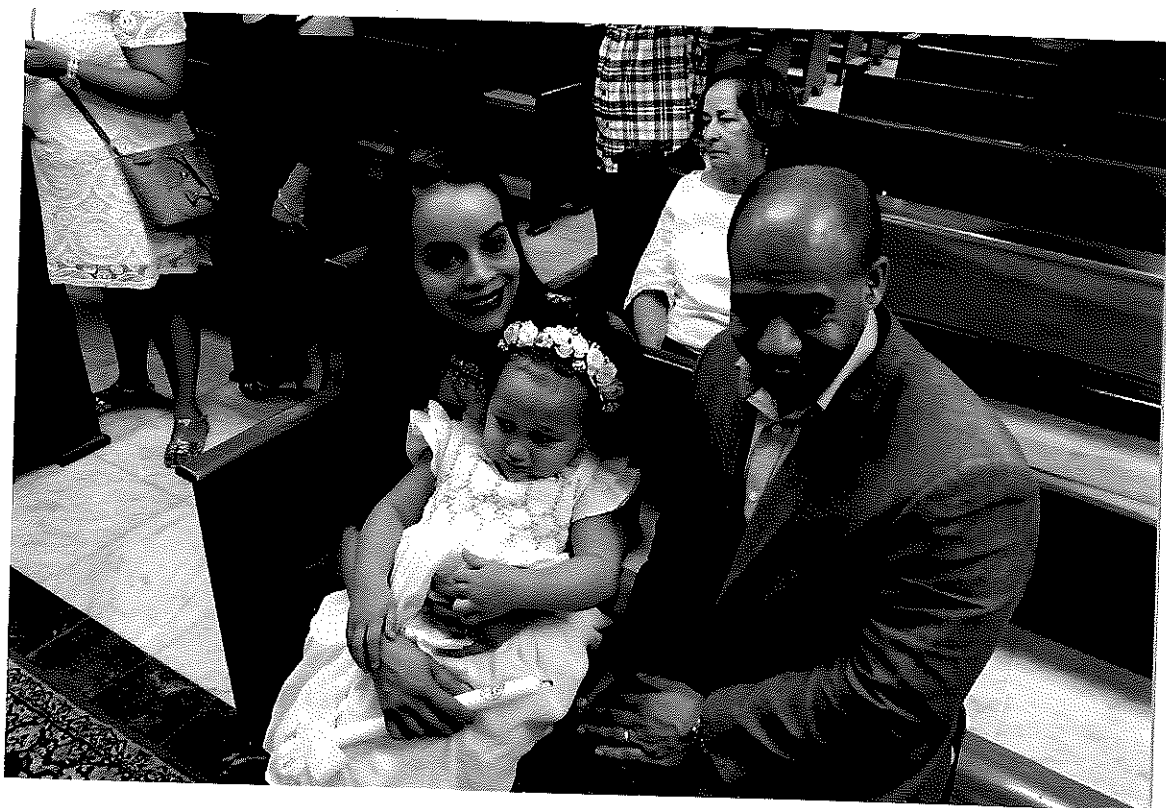


From Left: My mother Libertad Pina,
my wife Izabel, my wife's grandmother,
my son Sebastian, and my sister
Beatriz Pina.

Note: My mom and my sister live in
the United States.



My entire wonderful family the day of Sofia's baptism
in 2019. This is at the Radisson Santo Domingo.



My wonderful daughter Sofia in the hands of her GodParents. in 2019, the day of her baptism. she was born 4 days after I was incarcerated.

Both GodParents are American Citizen.

The picture was taken in Santo Domingo.



The GEO Group, Inc.

INMATE REQUEST TO A STAFF MEMBER

PETICION DE INTERNOS PARA UN MIEMBRO INSTITUCIONAL

TO/PARA: Mr. Hertlien.

(NAME AND TITLE OF OFFICER/NOMBRE Y TITULO DEL OFFICIAL)

SUBJECT: STATE, COMPLETELY, BUT BRIEFLY, THE PROBLEM ON WHICH YOU DESIRE ASSISTANCE, AND WHAT YOU THINK SHOULD BE DONE. (GIVE DETAILS)

RAZON: ESTIPULE COMPLETO PERO BREVEMENTE EL PROBLEMA CON EL CUAL DESEA ASISTENCIA Y LO QUE DEBE SER HECHO. (DAR DETALLES)

Please provide me an updated
Computation Data record

Thank You

(USE OTHER SIDE OF PAGE IF MORE SPACE IS NEEDED.)

(USE EL ATRO LADO DE LA HOJA IS MAS ESPACIO ES NECESITADO.)

NAME/NOMBRE: Leonardo Pina No./Numero: 21070-479CASE MANAGER: Mr. Hertlien DATE: Nov 10/20WORK ASSIGNMENT/ASIGNACION DE TRABAJO: Unit UNIT/UNIDAD: CS

NOTE: If you follow instructions in preparing your request, it can be disposed of more promptly and intelligently. You will be interviewed, if necessary, in order to satisfactorily handle your request. Your failure to specifically state your problem may result in no action being taken.

NOTA: Si usted sigue las instrucciones en preparar su peticion, puede ser dispuesta mas rapida y inteligentemente. Usted sera entrevistado si es necesario para poder manejar su peticion satisfactoriamente. Su negligencia en declarar su problema especificamente puede resultar en que no se tome alguna accion.

DISPOSITION: (DO NOT WRITE IN THIS SPACE)

DATE/FECHA: _____

DISPOSICION: (NO ESCRIBA EN ESTE ESPACIO)

Officer/Official

IM-004 ATTACHMENT A

MVCCX 540*23 *	SENTENCE MONITORING	*	11-12-2020
PAGE 001 *	COMPUTATION DATA	*	12:06:47
	AS OF 11-12-2020		

REGNO...: 21070-479 NAME: PINA, LEONARDO

FBI NO.....: 389271VA9	DATE OF BIRTH: 03-18-1969	AGE: 51
ARS1.....: MVC/A-DES		
UNIT.....: UNIT C	QUARTERS.....: C05-035L	
DETAINERS.....: YES	NOTIFICATIONS: NO	

HOME DETENTION ELIGIBILITY DATE: 02-11-2024

THE FOLLOWING SENTENCE DATA IS FOR THE INMATE'S CURRENT COMMITMENT.
THE INMATE IS PROJECTED FOR RELEASE: 08-11-2024 VIA GCT REL

-----CURRENT JUDGMENT/WARRANT NO: 010 -----

COURT OF JURISDICTION.....: NEW YORK, SOUTHERN DISTRICT
DOCKET NUMBER.....: 01 CR 619
JUDGE.....: MARRERO
DATE SENTENCED/PROBATION IMPOSED: 09-21-2018
DATE COMMITTED.....: 10-29-2018
HOW COMMITTED.....: US DISTRICT COURT COMMITMENT
PROBATION IMPOSED.....: NO

	FELONY ASSESS	MISDMNR ASSESS	FINES	COSTS
NON-COMMITTED..:	\$100.00	\$00.00	\$00.00	\$00.00

RESTITUTION...: PROPERTY: NO SERVICES: NO AMOUNT: \$00.00

-----CURRENT OBLIGATION NO: 010 -----

OFFENSE CODE....: 547 18:1925(B) RACKETEERING
OFF/CHG: 18:1959(A) (3) ASSAULT IN AID OF RACKETEERING (CT.1)

SENTENCE PROCEDURE.....: 3559 PLRA SENTENCE
SENTENCE IMPOSED/TIME TO SERVE.: 108 MONTHS
DATE OF OFFENSE.....: 12-11-2016

G0002 MORE PAGES TO FOLLOW . . .

MVCCX	540*23 *	SENTENCE MONITORING	*	11-12-2020
PAGE 002	*	COMPUTATION DATA	*	12:06:47
		AS OF 11-12-2020		

REGNO...: 21070-479 NAME: PINA, LEONARDO

-----CURRENT COMPUTATION NO: 010 -----

COMPUTATION 010 WAS LAST UPDATED ON 02-28-2020 AT DSC AUTOMATICALLY
COMPUTATION CERTIFIED ON 12-06-2018 BY DESIG/SENTENCE COMPUTATION CTR

THE FOLLOWING JUDGMENTS, WARRANTS AND OBLIGATIONS ARE INCLUDED IN
CURRENT COMPUTATION 010: 010 010

DATE COMPUTATION BEGAN.....: 09-21-2018
TOTAL TERM IN EFFECT.....: 108 MONTHS
TOTAL TERM IN EFFECT CONVERTED...: 9 YEARS
EARLIEST DATE OF OFFENSE.....: 12-11-2016

JAIL CREDIT.....:	FROM DATE	THRU DATE
	12-11-2016	09-20-2018

TOTAL PRIOR CREDIT TIME.....: 649
TOTAL INOPERATIVE TIME.....: 0
TOTAL GCT EARNED AND PROJECTED...: 486
TOTAL GCT EARNED.....: 162
STATUTORY RELEASE DATE PROJECTED: 08-11-2024
ELDERLY OFFENDER TWO THIRDS DATE: 12-11-2022
EXPIRATION FULL TERM DATE.....: 12-10-2025
TIME SERVED.....: 3 YEARS 11 MONTHS 2 DAYS
PERCENTAGE OF FULL TERM SERVED...: 43.5
PERCENT OF STATUTORY TERM SERVED: 51.1

PROJECTED SATISFACTION DATE.....: 08-11-2024
PROJECTED SATISFACTION METHOD...: GCT REL

REMARKS.....: 11-28-18:COMP ENTERED D/DMR
02-28-20: UPD FOR FSA/GCT D/LLF

G0002 MORE PAGES TO FOLLOW . . .

MVCCX 540*23 *
PAGE 003 OF 003 *

SENTENCE MONITORING
COMPUTATION DATA
AS OF 11-12-2020

* 11-12-2020
* 12:06:47

REGNO.: 21070-479 NAME: PINA, LEONARDO

----- CURRENT DETAINERS: -----

DETAINER NO.: 001
DATE LODGED.: 04-12-2019
AGENCY.....: IMMIGRATION & CUSTOMS ENFORCE
AUTHORITY....: ALLENWOOD, PA
CHARGES.....: PROBABLE CAUSE EXISTS THAT THE SUBJECT IS A REMOVABLE ALIEN

G0000 TRANSACTION SUCCESSFULLY COMPLETED



Inmate Withdrawal Form

Inmate Name Leonardo PinaUnit / Pod C5 - 35LBOP # 21070-479Amount: Postage \$5.75

Recipient Name and Address:

Please check one below:

- ☐ Hobby Craft
- ☐ R&D
- ☐ Transfer of Funds

MAIL

Name/Relationship/Phone Number JAZMIN PINA / Daughter2128 VIRGIL DLAddress BRONX, NY 10473

Address _____

Address _____

Reason CERTIFIED MAIL7019 1640 0001 1165 6031

[Signature]
Inmate Signature

[Signature]
Unit Staff Signature
***Verified Inmate Name and BOP#

If amount requested is over \$250 forward to Deputy Warden, Deputy Warden forward to SIS. **Please utilize a routing sheet for this procedure.**

SIS Signature _____

Assistant Facility Administrator _____



Inmate Withdrawal Form

Inmate Name Leonardo PinaUnit / Pod C5-35LBOP # 21070-479 Amount: _____

Recipient Name and Address:

Please check one below:

- ☐ Hobby Craft
- ☐ R&D
- ☐ Transfer of Funds

Name/Relationship/Phone Number
JAZMIN PINA2128 VIRGIL DLAddress
BRONX, NY 10473

Address

Address

Reason Mail

Inmate Signature

 Unit Staff Signature
 ***Verified Inmate Name and BOP#

If amount requested is over \$250 forward to Deputy Warden, Deputy Warden forward to SIS. **Please utilize a routing sheet for this procedure.**

 SIS Signature

 Assistant Facility Administrator

**MOSHANNON VALLEY CORRECTIONAL FACILITY
MEDICAL DEPARTMENT**

DATE: 3-13-2020

INMATE: Pina, Leonardo 21070-479

CS-42

PROCEDURE: Your Orthopedics follow up has been scheduled. If you decide that you do not wish to keep this appointment, please write a cop-out to my attention within the next 10 days.

This will allow us to notify the doctor's office and utilize the time for another patient.

Thank you,

Ms. E. Shaw

MVCCX * INMATE FINANCIAL RESPONSIBILITY * 05-05-2020
PAGE 001 OF 001 * DISPLAY INMT FINANCIAL OBLG ADJUSTMENTS * 11:04:16

REGNO: 21070-479 OBLG NO: ALL NO. ADJ TO VIEW: 15 FUNC: DSS
NAME.: PINA, LEONARDO TYPE OBLG: ASSESSMENT USDC
OBLG STATUS.: WAIT PLAN OBLG BAL...: 24.96 OBLG NO: 1
DATE ADDED FCL ADJ TYPE ADJ REASON ADJ AMT DEP NO. DETAIL
04-17-2020 MVC PAYMENT OUTSIDE 8.34 N
03-06-2020 MVC PAYMENT OUTSIDE 8.34 N
02-06-2020 MVC PAYMENT OUTSIDE 8.34 N
01-06-2020 MVC PAYMENT OUTSIDE 8.34 N
12-07-2019 MVC PAYMENT OUTSIDE 8.34 N
11-05-2019 MVC PAYMENT OUTSIDE 8.34 N
06-11-2019 SCH PAYMENT INSIDE PMT 25.00 9091 N
05-04-20

G0005 TRANSACTION SUCCESSFULLY COMPLETED - CONTINUE PROCESSING IF DESIRED

6)

**MOSHANNON VALLEY CORRECTIONAL FACILITY
MEDICAL DEPARTMENT**

DATE: 2-27-2020

INMATE: Pina, Leonardo 21070-479

C5-4L

PROCEDURE: Your Orthopedic consultation has been scheduled. If you decide that you do not wish to keep this appointment, please write a cop-out to my attention within the next 10 days.

This will allow us to notify the doctor's office and utilize the time for another patient.

Thank you,



Ms. E. Shaw

SCHCZ 606.00 * MALE CUSTODY CLASSIFICATION FORM * 06-28-2019
PAGE 001 OF 001 11:45:36

(A) IDENTIFYING DATA

REG NO.: 21070-479 FORM DATE: 06-28-2019 ORG: SCH
NAME: PINA, LEONARDO

MGTV: NONE

PUB SFTY: GRT SVRTY

MVED:

(B) BASE SCORING

DETAINER: (0) NONE SEVERITY: (7) GREATEST
MOS REL.: 63 CRIM HIST SCORE: (00) 0 POINTS
ESCAPES: (0) NONE VIOLENCE: (0) NONE
VOL SURR: (0) N/A AGE CATEGORY: (2) 36 THROUGH 54
EDUC LEV: (2) NO VERFD HS/ NO GED DRUG/ALC ABUSE: (0) NEVER/>5 YEARS

(C) CUSTODY SCORING

TIME SERVED: (4) 26-75% PROG PARTICIPAT: (2) GOOD
LIVING SKILLS: (2) GOOD TYPE DISCIP RPT: (5) NONE
FREQ DISCIP RPT: (3) NONE FAMILY/COMMUN: (4) GOOD

--- LEVEL AND CUSTODY SUMMARY ---

BASE CUST	VARIANCE	SEC TOTAL	SCORED	LEV	MGMT	SEC LEVEL	CUSTODY	CONSIDER
+11	+20	-4	+7	LOW	N/A		IN	DECREASE

G5149 INMATE/DESIG FACL LEVEL MISMATCHED, HAVE DSCC ADD A MGTV
G0005 TRANSACTION SUCCESSFULLY COMPLETED - CONTINUE PROCESSING IF DESIRED

Under the First Step Act , this Court has broad authority to determine whether extraordinary and compelling circumstances exist to modify petitioner's sentence and release him to home confinement. This motion is ripe because Petitioner requested relief more than 30 days ago.

The First Step Act , expressly permits Petitioner to move this court to reduce his term of imprisonment and seek compassionate release.

See 18 U.S.C. § 3583(c)(1)(A)(i).

Under normal circumstances , a Petitioner can seek recourse through the courts after either (1) the Federal Bureau of Prisons (BOP) declines to file such a motion on his behalf ; or (2) there has been a lapse of 30 days from the Warden's receipt of the Petitioner's request, whichever is earlier.Id.

Petitioner transmitted requests for compassionate release to the Warden at Moshannon Valley Correctional Institute . See Exhibit(s) Petitioner has exhausted the administrative process.

There are extraordinary and compelling circumstances to grant this request.

After exhausting the administrative process or the lapse of 30 days , " a court may then reduce the term of imprisonment " after finding that extraordinary and compelling reasons warrant such a reduction and such a reduction is consistent with applicable policy statements issued by the sentencing commission. United States v. Ebbers, 02 Cr. 1144 (VEC), 2020 WL 91399, at *4, Dkt. No. 384 (S.D.N.Y. Jan 8, 2020). In making such a decision , a court must also consider the sentencing factors set forth in section 3553(a) to the extent that they are applicable Id. (quoting 18 U.S.C. §(c)(1)(A)). The sentencing commission does not constraint the court's independent assessment of whether extraordinary and compelling reasons warrant a sentence reduction in light of the First Step Act's amendments. United States v. Beck 13, Cr. 186, 2019 WL 2716505, at *5-6 (M.D.N.C. June 28, 2019); See also Ebbers, 2020 WL 91399, at *4. Indded the district courts themselves have the power to determine what constitute extraordinary and compelling reasons for compassionate release. United States v. Young , 00 Cr. 02, 2020 WL 1047815, at *6 (M.D.Tenn. Mar. 4, 2020) (finding the legislative history of 18 U.S.C. § 3583(c)(1)(A)(i) to be "clearly intended to give the court the authority to reduce the term of imprisonment of a defendant who is sentenced to a term of imprisonment of more than one year if the court finds that there are extraordinary and compelling reasons to do so").

United States v. Pabon, 17. Cr. 165 Dkt. No. 118 (E.D. Pa. , May 4, 2020) (granting compassionate release because if the Court waits to act until BOP confirms its first case of COVID-19 at Lewisburg, it may be too late for vulnerable inmates like the defendant , and the court is not willing to take that risk)

United States. V. Fazio, 11 Cr. 873(ER). Dkt. No. 329 (S.D.N.Y May 15, 2020) granting compassionate release for a defendant at FCI Fort Dix low facility); United States v. Pagliuca, 17 Cr. 432 (CS), Dkt. No. 63 (S.D.N.Y. May 18, 2020) (same); United States v. Joel Prado, 13Cr. 811 (ALC), Dkt. No. 722 (S.D.N.Y. Apr. 30, 2020) (Granting compassionate release for a defendant at FCI Schuylkill; United States v. Ozols, 16 Cr. 692 (JMF), Dkt. No. 488 (S.D.N.Y. Jun 2, 2020) (granting compassionate release for a defendant at FSL Jessup).

Petitioner's Immigration detainer is not Disqualifying.

The Warden at Moshannon Valley CI based his denial of Petitioner's request for compassionate release on the fact that Petitioner is a deportable alien and because Immigration and customs Enforcement (ICE) has lodged a detainer for deportation proceedings.

See Exhibit - Warden's Response and Administrative Process
Therefore the Warden writes that Petitioner is ineligible for community programs to include halfway house , home confinement and compassionate release.

This stated bar however does not appear in 18 U.S.C § 3582 nor does it appear as a bar in the applicable Bureau of Prisons program statement. Unresolved detainers fall into the category of circumstances that should be considered along with the nature and circumstances of the offense, criminal history, supervised released violations, among many other factors. See Programs statement 5050.50 at p.12 available at https://www.bop.gov/policy/progstat/5050_050_EN.pdf.

The program statement cautions that all detainers and holds should be resolved prior to the Warden's submission of a case ; If a detainer cannot be resolved , then an explanation is needed. Id. at p.13. Thus, under BOP's own criteria , the detainer is simply

prison and could have been curbed if prison leaders acted sooner.]and were more transparent. See Kimberly Kindy, et al., These towns love their federal prison. But COVID-19 is straining their relationship. The Washington Post, May 9, 2020, available at [https://www.washingtonpost.com/national/these-towns-love-their-federal-prison-but-covid-19-is-st raining-their-relationship/2020/05/08/68e93702-9084-11-ea-9e23-6914ee410a5f_story.html](https://www.washingtonpost.com/national/these-towns-love-their-federal-prison-but-covid-19-is-straining-their-relationship/2020/05/08/68e93702-9084-11-ea-9e23-6914ee410a5f_story.html).

Petitioner is housed at a GEO facility which is run by the same GEO Group that :

1. Was found in 2013 guilty of "Doctoring its own Wikipedia Page".
2. Has been classified by the A.C.L.U. as "Prison profiteers"
3. GEO secretly banned COVID-19 testing thus makes them complicit in the policy of endangering Inmates health and well being.
4. The A.C.L.U. in a recent filing against GEO California found that GEO when considering releasing an inmate stricken with cancer was on the record of saying "...but he is not dying fast enough, to warrant a dire situation. "
5. In 2018 it was found "ICE contactor (GEO) scares activists with legal threats in an effort to cover up misdoings. - Source: A.C.L.U.
6. In a recent interview with the A.C.L.U. it was a general consensus among inmates at GEO "They dont care if you die".

There is a significant reason to believe that the number of positive cases reported in federal prisons are artificially low.

If the prisons are not testing people , they cannot say whether or not the virus is under control. Indeed the BOP facilities at Oakdale , Elkton, and Butner all posted low numbers shortly before inmates started dying; There are over 21 deaths among these facilities alone Id.

As a private facility , Moshannon Valley is far more of a black box regarding the information that is made available to the public. Unlike BOP facilities accross the country , Moshannon Valley does not post its statistics on the BOP website , tallying rates of infection and death. Nor to date, is anyone aware of any independent inspections or litigation regarding the conditions there. At the GEO facility in Queens , NEW York, GEO has tested only 44 inmates and 39 of them were positive. The actual rates might be even higher. That is a rate of 89 percent. There were also 30 positive

staff members.

GEO Queens medical team is severely understaffed. There is only one physician , Dr. Sajjad Mohammad, and one Registered Nurse (RN) on staff, both of whom visit the facility infrequently .

Currently , only one health professional - a licenced practical Nurse (LPN) - visits the facility on a daily basis. The LPN makes only cursory rounds to hand out pre-prescribed medication , take temperatures, and monitor high risk and COVID-19 positive inmates. Inmates are left alone with no medical monitoring for many hours at a time and there are no medical staff onsite at the facility at night. Moreover, because the LPNs are not licenced to prescribe medications or perform medical procedures, inmates who are experiencing symptoms of COVID-19 , but who have not been tested, cannot obtain needed medications or treatment. Given the current conditions at GEO Queens , it is likely that the majority of the inmate population has been exposed to COVID-19 but who have not been tested cannot obtain treatment.

Given that they run by the same company , logic dictates that Moshannon Valley C.I. may have similar medical staffing shortcomings. Moshannon Valley C.I. has at least three staff members tested positive.

As of October 25 2020, Unit A was placed on a strict lockdown by fear of COVID-19 outbreak, while the remaining compound inmates are kept in the dark without any updates.

When queried by any inmates about anything COVID-19 related the the Unit Manager responded facciosuly " I did not know that we now house Dr. Fauci's here ".

So the statistics that Moshannon Valley (if any) publishes are misleading. There has been no testing to any inmates for COVID-19. Courts have repeatedly discounted the government's reliance on a rate of zero in the absence of widespread or any testing. Petitioner urges the court to do the same.

Another Court has recently granted a compassionate release petition for a defendant who was also serving time at Moshannon Valley C.I. See. United States v. Molina Acevedo, 18 Cr. 365(LGS), 2020 WL 3182770 (S.D.N.Y. June 15, 2020). In that case, Judge Schofield credited the defendant's description of the living situation at the

the facility. Id. at *3 ("a Unit with seventy four inmates who share three toilets and showers, a single sink to wash their hands, and four or five other sinks for washing personal items.

Also, Petitioner want to bring to Court's attention the fact that an additional layer of quarantine was implemented due to a severe varicella outbreak. During this heightened period of uncertainty which caused severe angst to the inmates the facility blocked the ability to change weekly linen that was afforded to the inmates which resulted in a three week fermentation of the virus in the pod. To underscore this point the mental anguish in which the inmates faced was monumental to say the least. Daily sick calls to the prison psychiatrist increased seven fold due to the stress and anxiety increase.

The deplorable confined conditions the inmates face include make shift Gyms in the toilets, Christian bible studies in the limited shower stalls, petitioner asks the court to imagine to have seventy four grown men living in a thousand square foot area. The previous referenced Gym facility and bible study facility in toilets and shower stalls may seem laughable to some but it is the harsh reality behind the veiled doors of GEO Moshannon Valley.

On October 30, 2020 the curtains used to partition the three toilets were inexplicably removed in the wee hours of the morning. To the dismay and shagrin to the inmates who awoke to use the gentlemen's convenience as part of the morning routine, there were shocked and dishearten to come to the realization that they would have to use the toilet "for number 2 purposes" (using the prison Jargon) in full view of the entire dorm, and while other inmates were brushing their teeth less than one foot away and using the microwave less than 6 feet away to make their morning breakfast. This is no humane conditions.

Also, as of three months ago there were 6125 federal inmates and 700 BOP staff members that have tested positive for COVID-19.

of 18 U.S.C. § 3582(c)(1)(A) indicates that lawmakers thought that extraordinary and compelling reasons for a sentence reduction should not be limited to medical condition, age, and family circumstances and granting compassionate release.)

The United States Sentencing guidelines Application Notes to Section 1B.13 describe four potential extraordinary and compelling reasons, United States v. Venice, 17 Cr. 89 (CS), Dkt. No. 1009 (S.D.N.Y. May 7, 2020); See U.S.S.G. § 1B.13, cmt, n.t(A)-(D), including a catch all fourth category.

- Other reasons - As determined by the Director of the bureau of Prisons, there exists in the Petitioner's case an extraordinary and compelling reason than, or in combination with, the reasons described in subdivisions (A) through (C).

U.S.S.G. § 1B.13. cmt. n.1(D). Like the defendant in Venice, supra, Petitioner does not suggest he meets any of the first three categories, but argues that the risk the corona virus pandemic poses to one with his conditions meets the fourth category.

Many courts have consider granting compassionate release during the instant pandemic. See, e.g United States v. Knox, 15 Cr. 445 (PAE), Dkt. No. 1088 (S.D.N.Y. Apr 10, 2020), ; United States v. Resnick, 12 Cr. 152 (CM), Dkt. no. 461 (S.D.N.Y. Apr, 2, 2020); United States v. Perez, 17 Cr. 513 (AT), Dkt No. 98 (S.D.N.Y. Apr, 1, 2020); United States v. Sawicz, 08 Cr. 287 (ARR), 2020, WL 1815851 (E.D.N.Y. Apr. 10, 2020); United States v. Field, 18 Cr. 426 (JPO) Dkt. No. 38 (S.D.N.Y. Apr. 6, 2020); United States v. Musumeci, 07 Cr. 402 (RMB), Dkt. No. 58 (S.D.N.Y. Apr. 28 2020); United States v. Fazio, 11 Cr. 873(ER), Dkt. No. 329 (S.D.N.Y. May 15, 2020).

Jail is not a safe place for petitioner

The COVID-19 pandemic is extraordinary and unprecedented in modern times in this nation. It presents a clear and present danger to free society for reasons that need no elaboration.

United States v. Hernandez, 18 Cr. 834 (PAE), 2020 WL 1684062, at *3 (S.D.N.Y. Apr. 2, 2020). Confined to a small cell where social distancing is impossible Petitioner and inmates like him cannot protect them selves from the spread of a dangerous

and highly contagious virus. United States v. Perez , 17 Cr. 513 (AT), 2020 WL 1546422, at *4 (S.D.N.Y. Apr. 1, 2020). Effective and social distancing in most facilities is virtually impossible and crowding problems are often compounded by inadequate sanitation such as lack of hand sanitizer or sufficient opportunities to wash hands. See Exhibit - Affidavit from Brie Williams, M.D. Conditions of confinement create an ideal environment for the transmission of highly contagious diseases like COVID-19 See id. ("Because inmates live in close quarters, there is an extraordinary high risk of accelerated transmission of COVID-19 within jails and prisons.

Inmates share small cells , eat together and use the same bathrooms and sinks... They are not given tissues or sufficient hygiene supplies. In jails the probability of transmission of potentially pathogenic organisms is increased by crowding, delays in medical evaluation and treatment, rationed access to soap, water, and clean laundry and insufficient infection control expertise. See Joseph A. Blick (2007). Infection control in Jails and Prisons . Clinical infectious Diseases 45(8):1047-1055, at <https://academic.oup.com/cid/article/45/8/1047/344842>.

As the pandemic has persisted , jails officials have exposed the insufficiency of protective measures in federal facilities accross the country. For example the Warden at FCI Fort Dix said : "Social distancing is not possible at this environment. (See A.C.L.U of New Jersey , Press release, availabe at <https://aclu-nj.org/news/2020/05/04/medically-vulnerable-people -federal-prison-file-class-action>.

At FCI Ray Brook, the head of the correctional workers union said: The measures put in place are nothing more than an attempt to appear that we are addressing the issues, while in reality we are doing nothing. See* James Weldon, Correctional Officers' Union Sounds the Alarm, Adirondack Daily Enterprise (Mar. 24, 2020) available at <https://www.adirondackdailyenterprise.com/opinion/guest-commentary/2020/03/correctional-officers-union-at-fci-ray-brook-sounds-the-alarm/>.

In the community where FCC Lompoc is located, the mayor stated that the spread of COVID-19 in the community is largely due to the

On November 4 2020, at 09:20 am , The Facility Administrator L.J.Oddo escorted by United Manager D. Jones announced at Charlie Unit that 4 staff members have been tested positive for COVID. To this date no widespread Inmate testing has been conducted. So up to this date, nobody has any idea how many inmates have been tested.

The chances that there actually no people (inmates) with COVID-19 at Moshannon Valley are very slim. For example the federal prisons In California , finally engaged in a widespread testing, and they found 70 percent of the population at Lompoc and 65 percent of the population at FCI terminal island were positive for COVID-19. In Pennsylvanis where Moshannon Valley is located there are at least 75,800 cases of coronavirus and at least 7,000 deaths. See Pennsylvania Department of Health website , available at <https://health.pa.gov/topics/disease/coronavirus/Pages/Cases.aspx>. The virus has specifically arrived at Clearfield county , where Moshannon Valley C.I. is located. That the virus has entirely spared the facility (or that it will continue to) ignores our collective experience during this global pandemic. See United States v. Pagliuca 17 Cr. 432(CS), Dkt. No. 63 (S.D.N.Y. May 18, 2020) (holding that despite there being no positive cases yet at FCI Fort Dix low security prison facility , "that reduces the risk to Defendant, although of course the situation could change at any time , and of course anyone in an institution where social distancing is not possible - be it a prison or a nursing home - is by definition increased risk"). Of course the danger during this pandemic is that safety today does not guarantee safetytomorrow. Thus a number of courts have ordered compassionate release for high risk prisoners in prisons including Moshannon Valley C.I see United States v. Molina Acevedo, 18 Cr. 365(LGS) , 2020 WL 3182770 (S.D.N.Y. June 15, 2020) and United States v. Frometa Hernandez (N.Y.S.D.), See United States v. Asaro, 17 Cr. 127 (ARR), 2020 WL 1899221 at * 6 (E.D.N.Y) Apr, 17, 2020) (granting compassionate release because although there were no confirmed cases of COVID-19 at Springfield (prison were the defendant was housed) I cannot conclude that no cases are in fact present without assurances that the BOP is routinely testing everyone within the facility).

CALLOUTS	FOR	12-08-2020		WRK ASGN	QTR ASGN
21795-041	ARREOLA		TX NURSE	1300	QUARANTINE C01-002L
77076-067	DI SANTI		TX NURSE	1300	QUARANTINE C01-004L
54186-424	SHEKH		PSYCHIATRY	0700	QUARANTINE C01-008U
35100-058	YANG		PSYCHIATRY	0700	QUARANTINE C01-009U
77078-067	CORREIA		PSYCHIATRY	0700	A&O C02-004L
48830-018	CASTELLON-		PSYCHIATRY	0700	UNT C PM C02-007L
74258-053	MEDINA		PSYCHIATRY	0700	QUARANTINE C03-022L
55793-018	ENRIQUEZ		LAB	0700	COMMISSARY C05-026U
21070-479	PINA		PSYCHIATRY	0700	UNT C AM C05-035L
84290-011	MOHAMMAD-O		PA-C	0700	CONVL-TEMP C05-037L
66248-112	HARDAT		PA-C	0700	CONVL-TEMP C05-037U
86233-054	TORREALBA		PSYCHIATRY	0700	UNT C AM C06-004L
62515-018	RIVADENEIR		CRNP	0700	UNT C AM C06-011L
07316-104	LARA		CHRONIC CL	0700	CONVL-TEMP C06-022L
20280-104	PATTINO OS		CRNP	0700	FOODSVCPM1 C06-032L

G0000

TRANSACTION SUCCESSFULLY COMPLETED

REG NO	NAME	FROM	TO	TIME	CATEGORY (2)	CATEGORY (3)
CALLOUTS	FOR 11-19-2020				WRK ASGN	QTR ASGN
94167-083	ANANE		PA-C	0700	QUARANTINE	C01-001L
93513-083	ANYAOKU		PA-C	0700	QUARANTINE	C01-001U
38549-068	NYAMEKYE		PA-C	0700	QUARANTINE	C01-006U
54186-424	SHEKH		PA-C	0700	QUARANTINE	C01-008U
11655-070	DELOSSANTO		PA-C	0700	QUARANTINE	C01-009L
35100-058	YANG		PA-C	0700	QUARANTINE	C01-009U
03604-379	SANTACRUZ-		R/D	1000	UNT C AM	C02-017L
22022-084	MALDONADO		TX NURSE	0700	FOODSVCPM1	C02-039U
35222-069	MURILLO-HA		PSYCHOLOGY	0930	UNT C PM	C03-002L
00478-138	LE		TX NURSE	1300	PRO ED CHP	C03-035L
39684-177	MAGANA		R/D	1000	REC 1	C03-036U
51100-424	HAMDAN		CMC2	1430	UNT C AM	C04-009U
59695-019	CAMACHO TO		R/D	1030	FOODSVCMID	C04-010U
65132-208	RAMIREZ-RE		R/D	1030	UNT C PM	C04-014L
63388-018	VELAZQUEZ-		TX NURSE	1300	FOODSVCPM1	C04-028U
26072-017	BURCHELL		RN	0700	FOODSVCMID	C04-039U
57738-018	MARTINEZ-G		TX NURSE	0700	FOODSVCPM1	C05-013U
09929-078	CHAVEZ-RUB		PSYCHOLOGY	0930	FOODSVCMID	C05-027U
			RN	0700	FOODSVCMID	C05-027U
21070-479	PINA		PSYCHOLOGY	0700	UNT C AM	C05-035L
71163-050	HUSKIC		PSYCHOLOGY	0700	PROLIBRARY	C06-005U
70787-018	RODRIGUEZ-		PSYCHOLOGY	0700	FOODSVCPM1	C06-009U
72165-050	OLUGBODE		PSYCHOLOGY	0700	CONVL-TEMP	C06-016L
20859-041	GRACIANO		PSYCHOLOGY	0700	FOODSVCPM1	C06-027U
63424-018	GREGORIO		PSYCHOLOGY	0700	FOODSVCPM1	C06-035U
86911-054	GATA-AURA		PSYCHOLOGY	0930	FOODSVCMID	C06-036U

G0000 TRANSACTION SUCCESSFULLY COMPLETED

CALLOUTS	FOR	12-24-2020		WRK	ASGN	QTR	ASGN
72941-054	DALEY		PSYCHOLOGY	0700	MECHSRVC 2	C02-001L	
21070-479	PINA		PSYCHOLOGY	0700	UNT C AM	C05-035L	
71163-050	HUSKIC		PSYCHOLOGY	0700	PROLIBRARY	C06-005U	
72165-050	OLUGBODE		PSYCHOLOGY	0700	FOODSVCAM1	C06-016L	

G0000 TRANSACTION SUCCESSFULLY COMPLETED

REG. NO	NAME	FROM	TO	TIME	CATEGORY (2)	CATEGORY (3)
CALLOUTS FOR 12-10-2020						
77076-067	DI SANTI		TX NURSE	1300	QUARANTINE	C01-004L
54186-424	SHEKH		PSYCHIATRY	0700	QUARANTINE	C01-008U
11655-070	DELOSSANTO		TX NURSE	1300	QUARANTINE	C01-009L
35100-058	YANG		PSYCHIATRY	0700	QUARANTINE	C01-009U
			PSYCHOLOGY	0930	QUARANTINE	C01-009U
48830-018	CASTELLON-		PSYCHOLOGY	0930	UNT C PM	C02-007L
75999-054	LAJARA GUI		R/D	0600	MGR C	C03-026U
70125-018	SALTOS POS		PA-C	0700	CONVL-TEMP	C04-011U
24975-045	MORENO-MAL		TX NURSE	1300	QUARANTINE	C04-033L
21070-479	PINA		PSYCHIATRY	0700	UNT C AM	C05-035L
			PSYCHOLOGY	0700	UNT C AM	C05-035L
43696-198	RUELAS-VIL		PSYCHOLOGY	0700	CORRSRVC1	C06-005L
89974-053	HERRERA ME		PSYCHOLOGY	0930	GROUNDKEEP	C06-024U

G0000 TRANSACTION SUCCESSFULLY COMPLETED

CALLOUTS	FOR 12-12-2020		WRK ASGN	QTR ASGN
54977-479	OKULAJA	PSYCHOLOGY	0830	QUARANTINE C01-006L
72566-018	RAMON MARC	TX NURSE	1300	QUARANTINE C01-007L
35100-058	YANG	PSYCHOLOGY	0830	QUARANTINE C01-009U
48830-018	CASTELLON-	PSYCHOLOGY	0830	UNT C PM C02-007L
73884-053	VIALVA	PSYCHOLOGY	0830	UNT C AM C03-008L
42560-069	RODRIGUEZ-	TX NURSE	1230	FOODSVCPM1 C04-013L
24975-045	MORENO-MAL	TX NURSE	1230	QUARANTINE C04-033L
36327-298	GARCIA-FIE	TX NURSE	1130	FOODSVCPM1 C05-017L
09929-078	CHAVEZ-RUB	PSYCHOLOGY	0830	FOODSVCMID C05-027U
21070-479	PINA	TX NURSE	1430	UNT C AM C05-035L
86233-054	TORREALBA	PSYCHOLOGY	0830	UNT C AM C06-004L
89974-053	HERRERA ME	PSYCHOLOGY	0830	GROUNDKEEP C06-024U
		TX NURSE	1230	GROUNDKEEP C06-024U
20280-104	PATTINO OS	PSYCHOLOGY	0830	FOODSVCPM1 C06-032L

REG NO	NAME	FROM	TO	TIME	CATEGORY (2)	CATEGORY (3)
CALLOUTS FOR 12-11-2020					WRK ASGN	QTR ASGN
94167-083	ANANE		TX NURSE	1300	QUARANTINE	C01-001L
77076-067	DI SANTI		TX NURSE	1300	QUARANTINE	C01-004L
11655-070	DELOSSANTO		TX NURSE	1300	QUARANTINE	C01-009L
92013-083	SANCHEZ-LI		PA-C	0700	REC 2	C02-010L
79442-054	SUSANA		CRNP	0700	CONVL-TEMP	C02-013L
68118-054	SANTILLAN		PA-C	0700	QUARANTINE	C02-037L
51391-039	SHAH		CRNP	0700	UNT C AM	C03-004U
06221-032	OCHOA		CRNP	0700	FOODSVCMID	C04-011L
70125-018	SALTOS POS		PA-C	0700	CONVL-TEMP	C04-011U
24975-045	MORENO-MAL		TX NURSE	1300	QUARANTINE	C04-033L
26072-017	BURCHELL		CRNP	0700	FOODSVCMID	C04-039U
49650-054	GONZALEZ-B		CRNP	0700	UNT C PM	C05-031L
21070-479	PINA		CRNP	0700	UNT C AM	C05-035L
18163-055	INGLIMA		CRNP	0700	UNT C PM	C06-001L
67002-054	HILARIO-BE		CRNP	0700	UNT C PM	C06-006L
20136-104	PEREZ GONZ		CRNP	0700	FOODSVCMID	C06-017U
			PA-C	0700	FOODSVCMID	C06-017U
79618-054	GOMEZ		CRNP	0700	CONVL-TEMP	C06-028U
20280-104	PATTINO OS		CRNP	0700	FOODSVCPM1	C06-032L

G0000

TRANSACTION SUCCESSFULLY COMPLETED

**AFFIDAVIT OF BRIE WILLIAMS,
M.D.**

1. I am a doctor duly licensed to practice medicine in the State of California.
2. I am currently a Professor of Medicine at the University of California, San Francisco (“UCSF”) in the Geriatrics Division, Director of UCSF’s Amend: Changing Correctional Culture Program, as well as Director of UCSF’s Criminal Justice & Health Program. In that capacity, my clinical research has focused on improved responses to disability, cognitive impairment, and symptom distress in older or seriously ill prisoners; a more scientific development of compassionate release policies; and a broader inclusion of prisoners in national health datasets and in clinical research. I have developed new methods for responding to the unique health needs of criminal justice-involved older adults—including an evidence-based approach to reforming compassionate release policies and the design of a new tool to assess physical functioning in older prisoners. I was previously a consultant for the California Department of Corrections and Rehabilitation, as well as for other state prison systems.
3. I have extensive experience working with vulnerable populations, in particular the incarcerated and the elderly.

4. I submit this affidavit in support of any defendant seeking release from custody during the COVID-19 pandemic, so long as such release does not jeopardize public safety and the inmate can be released to a residence in which the inmate can comply with CDC social distancing guidelines. The statements in this affidavit are based only on the current state of emergency and the circumstances described below.

The Risk of Infection and Accelerated Transmission of COVID-19 within Jails and Prisons is Extraordinarily High.

5. Prisons and jails are not actually isolated from our communities: hundreds of thousands of correctional officers and correctional healthcare workers enter these facilities every day, returning to their families and to our communities at the end of their shifts, bringing back and forth to their families and neighbors and to incarcerated patients any exposures they have had during the day. Access to testing for correctional staff has been “extremely limited,” guards have reported a “short supply” of protective equipment, and prisons are not routinely or consistently screening correctional officers for symptoms.¹

6. The risk of exposure is particularly acute in pre-trial facilities where the inmate populations shift frequently.² For example, despite the federal government’s guidance to stay

¹ Keegan Hamilton, *Sick Staff, Inmate Transfers, and No Tests: How the U.S. Is Failing Federal Inmates as Coronavirus Hits*, Vice (Mar. 24, 2020), https://www.vice.com/en_ca/article/jge4vg/sick-staff-inmate-transfers-and-no-tests-how-the-us-is-failing-federal-inmates-as-coronavirus-hits.

See also Daniel A. Gross, “It Spreads Like Wildfire”: The Coronavirus Comes to New York’s Prisons, *The New Yorker* (Mar. 24, 2020), <https://www.newyorker.com/news/news-desk/it-spreads-like-wildfire-covid-19-comes-to-new-yorks-prisons>; Josiah Bates, “We Feel Like All of Us Are Gonna Get Corona.” *Anticipating COVID-19 Outbreaks, Rikers Island Offers Warning for U.S. Jails, Prisons*, *Time* (Mar. 24, 2020), <https://time.com/5808020/rikers-island-coronavirus/>; Sadie Gurman, *Bureau of Prisons Imposes 14-Day Quarantine to Contain Coronavirus*, *WSJ* (Mar. 24, 2020), <https://www.wsj.com/articles/bureau-of-prisons-imposes-14-day-quarantine-to-contain-coronavirus-11585093075>; Cassidy McDonald, *Federal Prison Workers Say Conflicting Orders on Coronavirus Response Is Putting Lives at Risk*, *CBS News* (Mar. 19, 2020), <https://www.cbsnews.com/news/coronavirus-prison-federal-employees-say-conflicting-orders-putting-lives-at-risk-2020-03-19/>.

² Emma Grey Ellis, *Covid-19 Poses a Heightened Threat in Jails and Prisons*, *Wired* (Mar. 24, 2020), <https://www.wired.com/story/coronavirus-covid-19-jails-prisons/>.

inside and many states' stay-in-place orders, many prosecutors are still arresting individuals and seeking detention.³ Pre-trial detention facilities are still accepting new inmates who are coming from communities where COVID-19 infection is rampant. As of today's date, the Bureau of Prisons is still moving inmates from facility to facility, including prisoners in New York.⁴

7. Because inmates live in close quarters, there is an extraordinarily high risk of accelerated transmission of COVID-19 within jails and prisons. Inmates share small cells, eat together and use the same bathrooms and sinks. They eat together at small tables that are cleaned only irregularly. Some are not given tissues or sufficient hygiene supplies.⁵ Effective social distancing in most facilities is virtually impossible, and crowding problems are often compounded by inadequate sanitation, such as a lack of hand sanitizer or sufficient opportunities to wash hands.⁶

Inmate Populations Also Have the Highest Risk of Acute Illness and Poor Health Outcomes if Infected with COVID-19.

8. There are more than 2.3 million people incarcerated in the United States⁷

³ Stephen Rex Brown, *'Business as Usual' For Federal Prosecutors Despite Coronavirus, Nadler Writes, Calling for Release of Inmates*, N.Y. Daily News (Mar. 20, 2020), <https://www.nydailynews.com/new-york/ny-nadler-doj-inmates-20200320-d6hbdjcuj5aitppi3ui2xz7tjy-story.html>.

⁴ Courtney Bubl , *Lawmakers, Union Urge Halt to All Prison Inmate Transfers*, Government Executive (Mar. 25, 2020), <https://www.govexec.com/management/2020/03/lawmakers-union-urge-halt-all-prison-inmate-transfers/164104/>; Hamilton, *Sick Staff, Inmate Transfers*; Luke Barr, *Despite Coronavirus Warnings, Federal Bureau of Prisons Still Transporting Inmates*, ABC News (Mar. 23, 2020), <https://abcnews.go.com/Health/warnings-bureau-prisons-transporting-inmates-sources/story?id=69747416>.

⁵ Justine van der Leun, *The Incarcerated Person Who Knows How Bad It Can Get*, Medium (Mar. 19, 2020), <https://gen.medium.com/what-its-like-to-be-in-prison-during-the-coronavirus-pandemic-1e770d0ca3c5> ("If you don't have money, you don't have soap or tissues."); Keri Blakinger and Beth Schwartzapfel, *How Can Prisons Contain Coronavirus When Purrell Is a Contraband?*, ABA Journal (Mar. 13, 2020), <https://www.abajournal.com/news/article/when-purrell-is-contraband-how-can-prisons-contain-coronavirus>.

⁶ Rosa Schwartzburg, *'The Only Plan the Prison Has Is to Leave Us To Die in Our Beds'*, The Nation (Mar. 25, 2020), <https://www.thenation.com/article/society/coronavirus-jails-mdc/>.

⁷ Kimberly Kindy *et al.*, *'Disaster Waiting to Happen': Thousands of Inmates Released as Jails and Prisons Face Coronavirus Threat*, Washington Post (Mar. 25, 2020), https://www.washingtonpost.com/national/disaster-waiting-to-happen-thousands-of-inmates-released-as-jails-face-coronavirus-threat/2020/03/24/761c2d84-6b8c-11ea-b313-df458622c2cc_story.html.

sick inmates, other than the facilities' Special Housing Unit (SHU).²³ While the cells in the SHU have solid doors to minimize the threat of viral spread in otherwise overcrowded facilities, they rarely have intercoms or other ways for sick inmates to contact officers in an emergency.²⁴ This is particularly dangerous for those with COVID-19 infection since many patients with COVID-19 descend suddenly and rapidly into respiratory distress.²⁵

18. Even those facilities that do have healthcare centers can only treat relatively mild types of respiratory problems for a very limited number of people.²⁶ This means that people who become seriously ill while in prisons and jails will be transferred to community hospitals for care. At present, access to palliative care in prison is also limited.

19. Corrections officers may also be particularly vulnerable to coronavirus due to documented high rates of diabetes and heart disease.²⁷ Prison staff in Pennsylvania, Michigan, New York and Washington state have tested positive for the virus, resulting in inmate quarantines. In Washington, D.C., a U.S. marshal who works in proximity to new arrestees tested positive for the virus, meaning dozens of defendants headed for jail could have been exposed.²⁸ In New York,

²³ MCC New York COVID 19 Policy Memo, Mar. 19, 2020, <https://www.documentcloud.org/documents/6818073-MCC-New-York-COVID-19-Policy-Memo.html>; Danielle Ivory, 'We Are Not a Hospital': A Prison Braces for the Coronavirus, N.Y. Times (Mar. 17, 2020), <https://www.nytimes.com/2020/03/17/us/coronavirus-prisons-jails.html>.

²⁴ Brie Williams *et al.*, *Correctional Facilities in the Shadow of COVID-19: Unique Challenges and Proposed Solutions*, Health Affairs (Mar. 26, 2020), <https://www.healthaffairs.org/doi/10.1377/hblog20200324.784502/full/>.

²⁵ Lizzie Presser, *A Medical Worker Describes Terrifying Lung Failure From COVID-19—Even in His Young Patients*, ProPublica (Mar. 21, 2020), <https://www.propublica.org/article/a-medical-worker-describes--terrifying-lung-failure-from-covid19-even-in-his-young-patients>.

²⁶ Ellis, *Covid-19 Poses a Heightened Threat in Jails and Prisons*; Li and Lewis, *This Chart Shows Why the Prison Population is So Vulnerable to COVID-19*.

²⁷ Brie Williams, *Role of US-Norway Exchange in Placing Health and Well-Being at the Center of US Prison Reform*, <https://ajph.aphapublications.org/doi/10.2105/AJPH.2019.305444> (published Jan. 22, 2020).

²⁸ Zusha Elinson and Deanna Paul, *Jails Release Prisoners, Fearing Coronavirus Outbreak*, WSJ (Mar. 22, 2020), <https://www.wsj.com/articles/jails-release-prisoners-fearing-coronavirus-outbreak-11584885600> ("We're all headed for some dire consequences," said Daniel Vasquez, a former warden of San Quentin and Soledad state prisons in

236 members of the New York Police Department have tested positive for coronavirus and 3,200 employees are sick, triple the normal sick rate.²⁹ Two federal prison staffers have also tested positive.³⁰

20. For this reason, correctional health is public health. Decreasing risk in prisons and jails decreases risk to our communities.

21. Reducing the overall population within correctional facilities will also help medical professionals spread their clinical care services throughout the remaining population more efficiently. With a smaller population to manage and care for, healthcare and correctional leadership will be better able to institute shelter in place and quarantine protocols for those who remain. This will serve to protect the health of both inmates as well as correctional and healthcare staff.

I declare under penalty of perjury that the foregoing is true and correct.

Dated: San Francisco, California
March 27, 2020



Dr. Brie Williams

California. "They're in such close quarters—some double- and triple-celled—I think it's going to be impossible to stop it from spreading.").

²⁹ Erin Durkin, *Thousands of NYPD Officers Out Sick Amid Coronavirus Crisis*, Politico (Mar. 25, 2020), <https://www.politico.com/states/new-york/albany/story/2020/03/25/thousands-of-nypd-officers-out-sick-amid-coronavirus-crisis-1268960>.

³⁰ Elinson and Paul, *Jails Release Prisoners, Fearing Coronavirus Outbreak*.

approximately 16% of whom are age 50 or older.⁸ The risk of coronavirus to incarcerated seniors is high. “Their advanced age, coupled with the challenges of practicing even the most basic disease prevention measures in prison, is a potentially lethal combination.”⁹ To make matters worse, correctional facilities are often ill-equipped to care for aging prisoners, who are more likely to suffer from chronic health conditions than the general public.

9. An estimated 39-43% of all prisoners, and over 70% of older prisoners, have at least one chronic condition, some of the most common of which are diabetes, hypertension, and heart problems.¹⁰ According to the CDC, each of these conditions—as well as chronic bronchitis, emphysema, heart failure, blood disorders, chronic kidney disease, chronic liver disease, any condition or treatment that weakens the immune response, current or recent pregnancy in the last two weeks, inherited metabolic disorders and mitochondrial disorders, heart disease, lung disease, and certain neurological and neurologic and neurodevelopment conditions¹¹—puts them at a “high-risk for severe illness from COVID-19.”¹²

⁸ Brie Williams *et al.*, *Strategies to Optimize the Use of Compassionate Release from US Prisons*, 110 AJPH S1, S23 (2020), available at <https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2019.305434>; Kimberly A. Skarupski, *The Health of America's Aging Prison Population*, 40 Epidemiologic Rev. 157, 157 (2018), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5982810/>.

⁹ Weihua Li and Nicole Lewis, *This Chart Shows Why the Prison Population is So Vulnerable to COVID-19*, The Marshall Project (Mar. 19, 2020), <https://www.themarshallproject.org/2020/03/19/this-chart-shows-why-the-prison-population-is-so-vulnerable-to-covid-19>.

¹⁰ Brie A. Williams *et al.*, *How Health Care Reform Can Transform the Health of Criminal Justice-Involved Individuals*, 33 Health Affairs 462-67 (2014), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4034754/>; Brie A. Williams *et al.*, *Coming Home: Health Status and Homelessness Risk of Older Pre-release Prisoners*, 25 J. Gen. Internal Med. 1038-44 (2010), available at <https://link.springer.com/content/pdf/10.1007/s11606-010-1416-8.pdf>; Laura M. Maruschak *et al.*, *Medical Problems of State and Federal Prisoners and Jail Inmates, 2011-12*, U.S. Dept of Justice (Oct. 4, 2016), at 5, available at <https://www.bjs.gov/content/pub/pdf/mpsfjji1112.pdf>.

¹¹ Harvard Health Publishing, *Coronavirus Research Center*, Harvard Medical School (Mar. 25, 2020), <https://www.health.harvard.edu/diseases-and-conditions/coronavirus-resource-center>.

¹² Centers for Disease Control and Prevention, *Coronavirus Disease 2019: People Who Are at Higher Risk*, <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/people-at-higher-risk.html> (last updated Mar. 22, 2020).

10. However, even many young federal prisoners suffer from asthma, rendering them also very vulnerable to coronavirus.¹³

11. But it is not only the elderly, or those with preexisting medical conditions that are at risk of coronavirus in a correctional setting. As of March 23, 2020, New York City reported that “[p]eople ranging in ages from 18 to 44 have accounted for 46 percent of positive tests.”¹⁴ Across the United States, 38% of those hospitalized are between the ages of 20 and 54 and 12% of the intensive care patients are between 20 and 44.¹⁵

12. This data is of particular concern for inmate populations, since prisoners’ physiological age *averages 10 to 15 years older* than their chronological age.¹⁶ Therefore, the consensus of those who study correctional health is that inmates are considered “geriatric, by the age of 50 or 55 years.”¹⁷ It is not clear that prison health care administrations are taking accelerated ageing into account when determining the eligibility criteria for age-related screening tools and medical care protocols for coronavirus, potentially leaving large swathes of the prison population at risk.¹⁸

¹³ Laura Maruschak, *Medical Problems of Jail Inmates*, Dep’t of Justice (Nov. 2006), at p. 2, available at <https://www.bjs.gov/content/pub/pdf/mpji.pdf>.

¹⁴ Kimiko de Freytas-Tamura, *20-Somethings Now Realizing That They Can Get Coronavirus, Too*, N.Y. Times (Mar. 23, 2020), <https://www.nytimes.com/2020/03/23/nyregion/nyc-coronavirus-young.html>.

¹⁵ *Id.*

¹⁶ Brie A. Williams *et al.*, *Aging in Correctional Custody: Setting a Policy Agenda for Older Prisoner Health Care*, 102 Am. J. Public Health 1475-81 (2012), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3464842/>; see also Brie Williams *et al.*, *Detained and Distressed: Persistent Distressing Symptoms in a Population of Older Jail Inmates*, 64 J. Am. Geriatrics Soc. 2349-55 (2016), <https://onlinelibrary.wiley.com/doi/pdf/10.1111/jgs.14310> (“For example, older jail inmates with an average age of 60 in this study reported poor or fair health [and] chronic lung disease . . . at rates similar to those reported by community-based lower income older adults with an average age of 72.”).

¹⁷ Brie A. Williams *et al.*, *The Older Prisoner and Complex Chronic Medical Care* 165-70 in World Health Organization, *Prisons and Health* (2014), <https://pdfs.semanticscholar.org/64aa/10d3cff6800ed42dd152fcf4e13440b6f139.pdf>.

13. In one study, we found that inmates who died in hospitals were, on average, nearly two decades younger than non-incarcerated decedents, had significantly shorter hospitalizations, and had higher rates of several chronic conditions including cancer, liver disease and/or hepatitis, mental health conditions, and HIV/AIDS.”¹⁹

The Entire Community is at Risk If Prison Populations Are Not Reduced

14. As the World Health Organization has warned, prisons around the world can expect “huge mortality rates” from Covid-19 unless they take immediate action including screening for the disease.²⁰

15. As of March 24, 2020, at least 38 people involved in the New York City correctional system have tested positive for Covid-19.²¹ Already, three inmates and three staff at federal correctional facilities across the United States have tested positive for the coronavirus, according to the Federal Bureau of Prisons.²²

16. Jails and prisons are fundamentally ill-equipped to handle a pandemic.

17. Medical treatment capacity is not at the same level in a correctional setting as it is in a hospital. Some correctional facilities have no formal medical ward and no place to quarantine

¹⁸ Brie A. Williams *et al.*, *Differences Between Incarcerated and Non-Incarcerated Patients Who Die in Community Hospitals Highlight the Need For Palliative Care Services For Seriously Ill Prisoners in Correctional Facilities and in Community Hospitals: a Cross-Sectional Study*, 32 J. Palliative Med. 17-22 (2018), available at <https://journals.sagepub.com/doi/pdf/10.1177/0269216317731547>.

¹⁹ *Id.* at 20.

²⁰ Hannah Summers, ‘Everyone Will Be Contaminated’: Prisons Face Strict Coronavirus Controls, *The Guardian* (Mar. 23, 2020), <https://www.theguardian.com/global-development/2020/mar/23/everyone-will-be-contaminated-prisons-face-strict-coronavirus-controls>.

²¹ Ellis, *Covid-19 Poses a Heightened Threat in Jails and Prisons*.

²² Ryan Lucas, *As COVID-19 Spreads, Calls Grow to Protect Inmates in Federal Prisons*, NPR (Mar. 24, 2020), <https://www.npr.org/sections/coronavirus-live-updates/2020/03/24/820618140/as-covid-19-spreads-calls-grow-to-protect-inmates-in-federal-prisons>.

Esto certifica que

LEONARDO PINIA

Fue bautizado en el nombre del Padre, del Hijo y del Espíritu Santo

En

Moshannon Valley, Phillipsburg Pa, USA

En el día 29 de Septiembre en el año de nuestro Señor 2019

Rev. Abner Garcia



Un solo Señor, una sola fe, un solo bautismo
un solo Dios y Padre de todos, el cual es sobre todos
y por todos y en todos

Efesios 4:5-6

United States Department of Justice
Federal Bureau of Prisons

LEONARDO PINA

has satisfactorily completed the
requirements for the forty hour
DRUG ABUSE EDUCATION COURSE
and is hereby awarded this


Certificate of Achievement in Drug Education



D. A. P. Coordinator

4/28/2017

Date



Drug Treatment Specialist

United States Department of Justice
Federal Bureau of Prisons

LEONARDO PINA

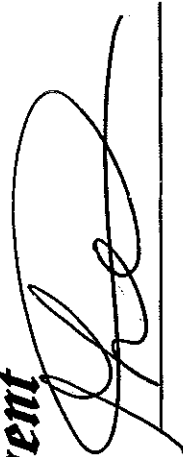
has satisfactorily completed the
requirements for the

NON-RESIDENTIAL DRUG TREATMENT PROGRAM

and is hereby awarded this

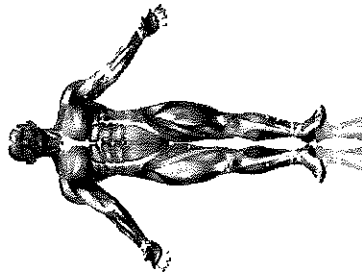
Certificate of Achievement

Elmer Muller 8/28/17

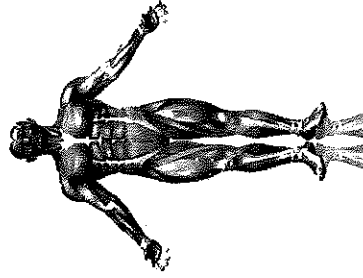


Program Coordinator

**F.C.I. SCHUYLKILL
CERTIFICATE OF ACHIEVEMENT
AWARDED TO:**



**PINA
21070-479**



ANATOMY 8 CLASS

June, 2019

A. Duayne, Program Supervisor

**F.C.I. SCHUYLKILL
CERTIFICATE OF ACHIEVEMENT
AWARDED TO:**

**PINA
21070-479**



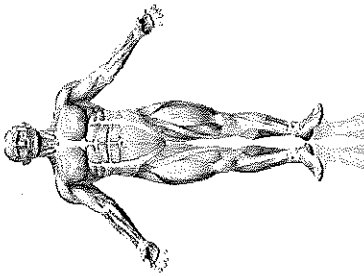
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BRAIN FITNESS**

March, 2019

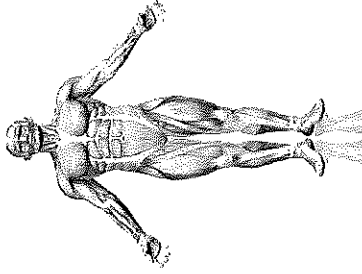
A.Y.

A. Duayne, Program Supervisor

**F.C.I. SCHUYLKILL
CERTIFICATE OF ACHIEVEMENT
AWARDED TO:**



**PINA
21070-479**



**ANATOMY & PHYSIOLOGY CLASS
INTEGUMENTARY SYSTEM**

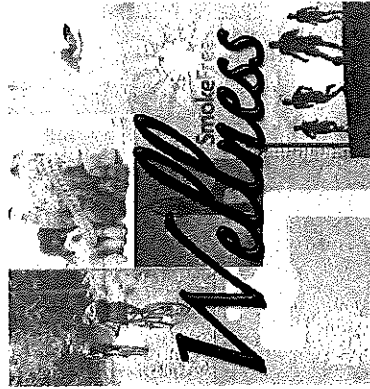
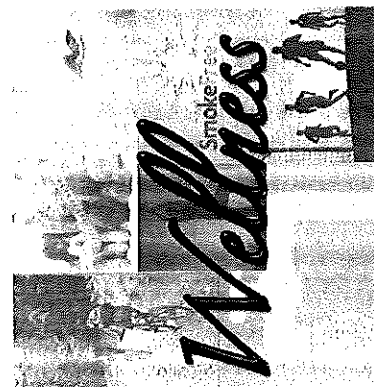
April, 2019

A. Duayne

A. Duayne, Program Supervisor

**F.C.I. SCHUYLKILL
CERTIFICATE OF ACHIEVEMENT
AWARDED TO:**

**PINA
21070-479**



BODY COMPOSITION CLASS

April, 2019

A. R.

A. Ducayne, Program Supervisor

**F.C.I. SCHUYLKILL
CERTIFICATE OF ACHIEVEMENT
AWARDED TO:**

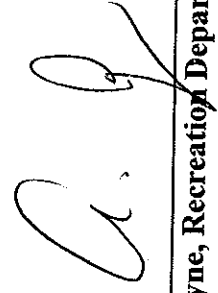


**PINA
21070-479**

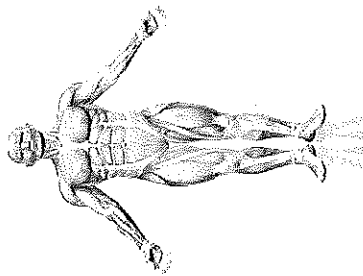


**DISEASE PREVENTION CLASS
BLOOD PRESSURE AWARENESS**

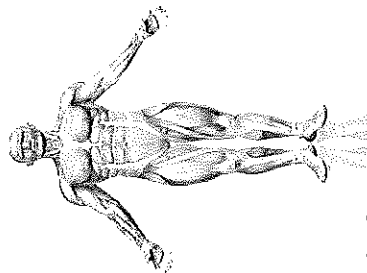
April, 2019


A. Duayne, Recreation Department

**F.C.I. SCHUYLKILL
CERTIFICATE OF ACHIEVEMENT
AWARDED TO:**

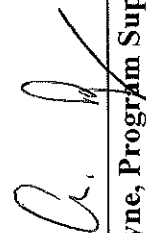


**PINA
21070-479**



FUNCTIONAL ANATOMY 1 CLASS

July, 2019


A. Duayne, Program Supervisor

F.C.I. SCHUYLKILL CERTIFICATE OF ACHIEVEMENT AWARDED TO:

**PINA
21070-479**



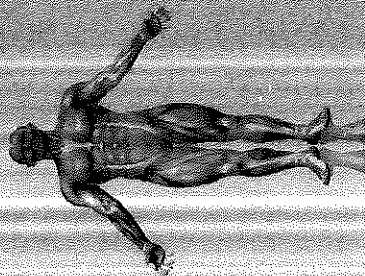
NUTRITION CLASS

April, 2019

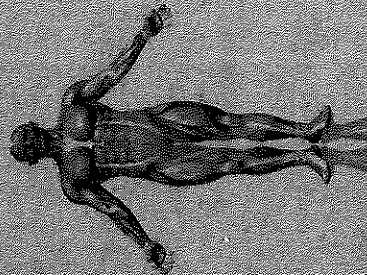
A. J.

A. Duwayne, Recreation Department

**F.C.I. SCHUYLKILL
CERTIFICATE OF ACHIEVEMENT
AWARDED TO:**



**PINA
21070-479**



**ANATOMY & PHYSIOLOGY CLASS
NERVOUS SYSTEM**

March, 2019

A. L.

A. Duayne, Program Supervisor

From: Leonardo Pina
BOP #21070-479, MVCC
555 GEO Drive,
Philipsburg, PA, 16866

01 Cr. 619

US MAIL
S.D.N.Y.



7019 1120 0001 4965 0866

To: Honorable Judge Victor M.
United States District Court
Southern District of New York
Daniel Patrick Moynihan US Courthouse
500 Pearl Street,
New York, NY, 10007